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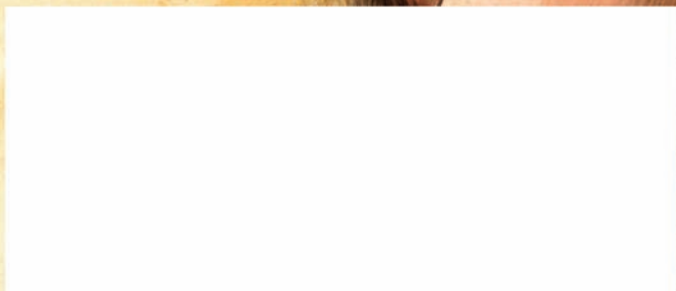
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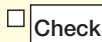
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*The American Legion Magazine*, a leader among national general-interest publications, is published monthly by The American Legion for its 2.7 million members. These wartime veterans, working through 15,000 community-level posts, dedicate themselves to God and Country and traditional American values; strong national security; adequate and compassionate care for veterans, their widows and orphans; community service; and the wholesome development of our nation's youth.



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### 'Out of Harm's Way'

Thank you for the articles about Landstuhl Regional Medical Center (March). As Legionnaires, we owe it to our military men and women to keep up our support.

While on a recent trip to Germany, my wife and I had the opportunity to visit LRMC. As the Nevada coordinator for Operation Wounded Warrior, an American Legion program that provides support to Brooke Army Medical Center in Texas and the Naval Medical Center in San Diego, I wondered if LRMC had similar needs and how we could support them from here. I learned that both Operation Wounded Warrior and Operation Landstuhl have similar goals of supporting members of the U.S. military and their families.

I encourage all Legionnaires to become involved with these grassroots efforts to help our troops. I have personally met many of them at three different hospitals now, and I assure you they truly do appreciate our support.

— Victor "Doc" Moss, Commander, Paradise Post 149, Las Vegas

I enjoyed the Landstuhl story. It was a true guts-and-glory article. I am a Cold War veteran who served in Landstuhl from 1960 to 1963. In my day, we would go there for sick call and dentistry. Now Landstuhl plays a pivotal role in the war on terror. I am happy *The American Legion Magazine* has highlighted what goes on there. We all can be proud of what the staff does for our warriors. I salute them all.

— George J. Walton, Upper Darby, Pa.

The article on the Landstuhl medical facility is excellent – a very detailed piece about its people and how it all works. The article prompted me to make a donation. Well done.

— Edward Cooper, Aztec, N.M.

Thanks for the articles on Landstuhl Regional Medical Center. From early 1953 to the spring of 1956 my wife and I were stationed at the original U.S. Army 324th General Hospital. I was an NCO X-Ray tech and my wife was a corporal obstetrical tech in the Women's Army Corps. We are

retired now and often speak of our service at Landstuhl, sharing fond memories of times long ago and far away.

— Bill and Bea King, Orlando, Fla.

### 'A Farm Boy at War'

Harold Hammil's article (March) reminded me of things that happened during the early 1960s when I was going through ground combat training as an Air Force forward air/combat controller. The instructors selected a few of us farm and mountain boys to be aggressors in a training exercise. We conned the instructor into letting us use his shotgun – normally reserved for snake protection in the swamps of South Carolina – to shoot a few squirrels. We barbecued them in preference to C-rations.

— Zack T. Fleming, Charles Town, W.Va.

I wanted to comment on Harold Hammil's article, which reminded me of a story my grandfather told me. He, too, was a World War II combat veteran, a Wisconsin farm boy and the only one in his company who knew how to milk



cows. He said there were stray cows all over, and anytime they had an opportunity he would collect up a few helmets and milk cows for himself and his buddies. My grandfather passed away in December, and his milk story from the war will be one I think about often. It makes me smile, too. I'm grateful for all our brave men and women did in World War II, and I'll never forget them. Thanks for the great story.

— Nate Katzenmeyer, Evansville, Wis.

### **'Faces of Freedom'**

We were very pleased to see Rebecca Pepin's book "Faces of Freedom" profiled in the March issue of *The American Legion Magazine*. We learned about the book while searching the Fisher House Web site and were pleased to be among the first to order it. We congratulate Pepin and pray that many more people will come to know the 52 fallen heroes she profiles in her wonderful book. If only all Americans could understand what Pepin, a naturalized U.S. citizen, has realized about the wonderful opportunities in our country.

— Harry and Sharon Rideout,  
Hermon, Maine

### **'Efficient, ethical, transparent'**

Kenneth Danilson's article (March) explaining The American Legion's accountability of donated funds is refreshing and informative. His "out-in-the-open" disclosure of how funds are safeguarded and distributed is not something you generally read in an organization's monthly publication.

It is reassuring to know that all donations received by the Legion are in good hands and are properly protected and used. Danilson's article greatly encouraged us in our future support for your organization, and a contribution has been made today. May this correspondence encourage others to do the same.

— Bob Eicher, Chico, Calif.

### **Making a difference**

I recently read that The American Legion created a college scholarship fund – the American Legacy Scholarship – for surviving children of military men and women who died serving on active duty since Sept. 11, 2001.

Looking back, a similar New York scholarship program changed my life. My father served as an Army captain during World War II; he died many years later. As the son of a deceased veteran, I received a Child of a Deceased Veteran scholarship that paid 90 percent of my college expenses. I was proud to receive it as a legacy from my father.

It is my belief that any surviving child of a deceased military veteran should be entitled to a full college scholarship. Support for the troops is empty rhetoric without the necessary sacrifice and full support of our government and private sources.

The American Legion is doing what one would expect and admire, but as the Legion itself indicates, it is not enough. To ensure that every child of a deceased veteran has an opportunity to attend college will take

cooperative efforts at all levels of government, private business, industry leaders, civic and religious organizations, and veterans advocates such as The American Legion. It is the right thing to do.

— E. Scott Ryan, Blossburg, Pa.

### **Bring back the draft**

As a Navy and Marine Corps veteran of the Vietnam and Persian Gulf wars, I am concerned that by activating so many military reserve and National Guard components we are leaving the homeland wide open and inviting enemy conflict on our own soil.

In order to assure our nation is adequately protected in the absence of so many reservists and Guardsmen, there is a need for an immediate return of the Selective Service draft.

— Kenneth V. Johnson, Cedar Rapids, Iowa

### **Left out in the cold**

For five years, a class of military veterans who honorably served their nation has been denied access to the VA health-care system. Many were not even aware of their exclusion until they sought medical attention from VA.

A number of attempts have since been made to persuade the current administration to reconsider denying medical services to Priority 8 veterans, but these pleas have been ignored.

Since their exclusion in 2003, many elderly veterans have died believing that their nation forgot them.

— Joe Perrella, Wharton, N.J.

### **THE AMERICAN LEGION MAGAZINE WELCOMES YOUR OPINIONS**

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# Washington's forgotten memorial



Noel St. John

The Doric-style marble temple is surrounded by dense groves of hardwood trees that were planted into West Potomac Park's marshy soil nearly 80 years ago. Curious visitors only occasionally drift off the main pathway that leads from the Lincoln Memorial to the U.S. Capitol – the two-mile stretch of Washington known as the National Mall – and make their way to the unheralded District of Columbia War Memorial. They try to locate it, among America's most beloved memorials and monuments, on their National Park Service maps.

Strolling from the World War II Memorial Plaza toward the great Lincoln statue, they can find the bone-white monument tucked behind a set of restrooms, beyond a canopy of low branches. Dead grass rises through the gaps of its walkway stones, and the marble is cracked and veined with age and water damage.

The D.C. memorial seems out of context with the rest of the mall. Although on federal property, it is specifically dedicated to 499 local Washingtonians who lost their lives fighting in what then was known as the Great War. Other sites along the mall, such as the Korean War Memorial, the Vietnam Wall and the new World War II Memorial Plaza, are more national in scope.

The deteriorating D.C. memorial is the mall's only nod to World War I. The last living U.S. veteran of that war, 107-year-old Legionnaire Frank Buckles, recently visited it, and took note of its condition. He and a friend, Michigan photographer David DeJonge ([www.dejongestudio.com](http://www.dejongestudio.com)), are pushing for the memorial's restoration and an expansion that may include statues of American doughboys positioned in the surrounding woods, as if on patrol.

The D.C. memorial was more than a local attraction in its day. Completed in the depths of the Depression, after Congress authorized construction in 1924 and \$200,000 in local funds were raised, it would become the first such monument to include the names of blacks and women among those of white male troops.

The memorial was designed and built to comfortably seat the Marine Band on Armistice Day 1931, when it was dedicated by President Herbert Hoover. Thousands attended. Among the speakers was Gen. John "Black-jack" Pershing. John Philip Sousa, at age 77, wore his Navy uniform as he led the Marine Band in "The Stars and Stripes Forever" during the ceremony, which was broadcast nationally on the radio.

The memorial was used for concerts and ceremonies for years after its dedication. In more recent times, it has fallen into such disrepair that the D.C. Preservation League has listed it among the "Most Endangered Places" in the district. The American Legion passed a national resolution last summer calling upon the National Park Service to elevate the memorial on its priority list, to repair and maintain it.

To allow its further decay is no way to bid farewell to this generation of veterans, now reduced to one, that founded The American Legion on the values of never forgetting freedom's costs. They are the values we honor on Memorial Day, and they are etched into the marble of a Doric-style temple in West Potomac Park.



Chase Studios

National Commander  
Marty Conatser

## MEMORANDA

### AN INDEX OF WAR MEMORIALS:

The American Legion, the Alliance Defense Fund and the Liberty Legal Institute have teamed up to build a database of war and veterans memorials across the nation. In many places, military and veterans memorials have come under attack by groups such as the American Civil Liberties Union that seek to remove religious references from public monuments and memorials, many of which are dedicated to military service and sacrifice. American Legion posts are asked to submit information and photos about war and veterans memorials in their communities.

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### CHILD WELFARE FOUNDATION:

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# FISA immunity for telecoms



## SUPPORT

### Sen. Orrin Hatch, R-Utah

■ A former chairman of the Senate Judiciary Committee, Hatch is a senior member of the Senate Select Committee on Intelligence.

The federal government's first priority is to protect our rights to life, liberty and the pursuit of happiness. That's why I have pushed for Congress to modernize the 30-year-old Foreign Intelligence Surveillance Act, or FISA, so that our intelligence community has the legal tools to keep us safe in an increasingly high-tech world.

As vital as FISA is to national security, its passage was delayed by politicians trying to score points with advocate groups by beating up on the Bush administration. Opponents of this bill have used scare tactics to confound bipartisan efforts to protect the country. Critics want Americans to fear their government and ignore the terrorists.

The main controversy on FISA is retroactive legal immunity for telecom companies alleged to have helped the government's surveillance efforts. But telecom immunity is vital for protecting national security.

Allowing irresponsible lawsuits risks letting terrorists learn the methods we use to track them.

We can't jeopardize the safety of our families and friends in order to line the pockets of these few trial attorneys. If we allow frivolous litigation to damage these telecom companies, we will surely not receive their help in the future. We need the voluntary assistance of telecoms to prevent possible terror attacks.

Lawsuits could reveal what technology we use, which private companies provide assistance, what information we've gathered on terrorists, and strategies we use in terrorism investigations.

Some well-intentioned people worry that FISA legislation does not protect civil liberties, but without the Protect America Act, our intelligence community does not have the tools to adequately protect our country.



## OPPOSE

### Rep. Sheila Jackson Lee, D-Texas

■ Jackson Lee is co-chair of the Congressional Progressive Caucus FISA Task Force.

To win the war on terror, the United States must remain true to the founding architects of this democracy, who created a constitution that enshrined an inalienable set of rights. This Bill of Rights guarantees to Americans certain funda-

mental freedoms that cannot be limited by their government. One of these freedoms, delineated in the Fourth Amendment, is the right of the people to be secure in their persons,

houses, papers and effects against unreasonable searches and seizures.

We do not circumvent the Fourth Amendment merely because it is inconvenient. The Foreign Intelligence Surveillance Act (FISA) is essential to fighting the war on terror, but it needs to be revised to reflect the democratic principles that have made this country the crown jewel of democracy.

One way to amend FISA is to ensure that any surveillance of an American is done through established legal procedures, pursuant to FISA and the FISA court authority. Furthermore, the Foreign Intelligence Surveillance Court is indispensable and must play a meaningful role in ensuring compliance with our Constitution.

Additionally, Congress should reject any proposal that grants amnesty to any telecommunications company that aids in the illegal surveillance, or reverse targeting, of unsuspecting Americans by national-security agencies. Amnesty will have the unintended consequence of encouraging telecommunications companies to comply with illegal requests to put innocent Americans under surveillance.

The only permissible path to legalization of conduct in this area is full compliance with the requirements of FISA.

## THE HEART OF THE ISSUE

***U.S. telephone companies that helped the government conduct terrorist surveillance after 9/11, without court orders, are facing dozens of lawsuits.***

## CONTACT YOUR LEADERS

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# AFRICOM

*In the post-colonial era, Africa has seen more than its share of chaos and violence. U.S. forces offer a stabilizing influence.*

BY ALAN W. DOWD

For all its imperfections, the Bush administration deserves credit for something that few Americans have noticed over the past seven-plus years: elevating Africa to more than a foreign-policy footnote.

Even as the administration focused on thwarting terrorist attacks in the United States, wresting nukes from North Korea and Iran, and prosecuting wars in Iraq and Afghanistan, it managed to build an infrastructure of programs and policies that future administrations will use to help stabilize Africa. The creation of the Pentagon's Africa Command (AFRICOM) is only the latest example of newfound U.S. interest in what was once a low-priority continent.

## COMMENTARY

**Small Footprints.** AFRICOM is an idea whose time has come. As Gen. William Ward, first commander of AFRICOM, observes, "The economic, political and social importance of the African continent continues to grow."

Ending what Defense Secretary Robert Gates

calls an "outdated arrangement left over from the Cold War," AFRICOM is the natural result of Washington's long-overdue decision to formalize and focus its patchwork of operations on the continent. Africa was previously divided among three of the Pentagon's overseas commands: Central Command (CENTCOM), which had overseen Egypt and much of East Africa; Pacific Command (PACOM), responsible for the islands off Africa's east coast; and European Command (EUCOM), which had shouldered responsibility for the rest of Africa. Once AFRICOM becomes fully operational in October, it will have primary responsibility for the entire continent, except Egypt, which will remain under CENTCOM's purview.

According to the AFRICOM Transition Team, the new command will help Washington "prevent and respond to humanitarian crises," combat terrorism, stabilize the continent and coordinate various interagency efforts with the U.S. Agency for International Development (USAID) and the State Department. Theresa Whelan, deputy assistant





*Cameroonian naval personnel and U.S. sailors load medical supplies donated by Project Handclasp onto a supply truck bound for Limbe Naval Base in Cameroon. The humanitarian effort was made possible by the African Partnership Station (APS) and the USS Fort McHenry (LSD 43). In months to come, America's newest military command – AFRICOM – will be dedicated specifically to U.S. military efforts on the continent. The only question remaining about it is where it will be headquartered: on land or at sea? U.S. Navy*

secretary of defense for African affairs, says the command will focus on “war prevention rather than war fighting.” She talks about “a more holistic approach” to security and development. And she notes that, if

successful, AFRICOM will make U.S. military interventions less necessary. “AFRICOM is about helping Africans build greater capacity to assure their own security,” she explains.

By supporting the State Department, USAID and their various development programs, AFRICOM will encourage what Ward calls “African solutions to African challenges.” And by coordinating closely with civilian agencies, AFRICOM will be decidedly different than its sister commands. For instance, AFRICOM’s deputy commander will be a high-ranking Foreign Service officer.

“It’s an evolutionary construct,” Ward concedes. But it may be necessary, given Africa’s unique challenges and AFRICOM’s focus on humanitarian and development efforts. As Whelan has observed, “The United States spends approximately \$9 billion a year in Africa funding programs in such areas as health, development, trade promotion and good governance,” but only \$250 million on security-related programs.

Last year, *The Economist* reported “keen competition among African countries to host AFRICOM’s

new headquarters.” That’s largely a result of the positive feelings many Africans hold for the United States. A Pew Research Center poll reveals that African nations occupy eight of the top 11 spots in a survey on global views of the United States, with Ivory Coast, Kenya, Nigeria, Ghana, Ethiopia, Mali and Uganda embracing “American ideas about democracy” and “American ways of doing business.”

According to *National Defense* magazine, Navy officials are proposing to base the new command onboard a high-tech “joint command and control ship.” But no matter where AFRICOM is ultimately headquartered, Whelan says the Pentagon plans to “keep our footprint very small and very discreet.”

Some have criticized the new command for militarizing U.S. foreign policy in Africa. Last year, for example, Rep. Donald Payne, D-N.J., chairman of the House Subcommittee on Africa and Global Health, noted that some African governments “believe we are trying to extend the global war on terror.” Although he seemed pleased that AFRICOM elevates America’s relationship with Africa to a “priority rather than an afterthought,” Payne criticized the administration for lack of consultation with Congress. “I was shocked and dismayed when I learned from a newspaper of the administration’s plans to establish AFRICOM,” he said.

The administration’s communication skills notwithstanding, what is really shocking and dismaying is the fact that it took until 2007 for the United States to create a military command devoted expressly to Africa – a resource-rich, war-torn continent of 877 million people.

As various witnesses observed during hearings chaired by Payne, for most of the postwar era, Washington’s Africa policy has ranged from “benign neglect” to “strategic neglect.” Indeed, one wonders how different Africa might be today if there had been an AFRICOM in 1992, 1994, 1998 or 2002. Maybe Somalia wouldn’t have starved. Maybe 800,000 Rwandan Tutsis would still be alive. Maybe al-Qaeda wouldn’t have hit U.S. embassies in Kenya and Tanzania. Maybe Darfur wouldn’t have slid toward genocide.

AFRICOM cannot change the past, but it can impact the future – a future that promises to force Americans to pay more attention to Africa. As President Bush observed before his 2008 tour across Africa, the continent is “increasingly vital to our strategic interests.”

**Strategic Interests.** What are those interests?

■ **Protecting the free flow of energy.** “Persistent insecurity in Nigeria’s oil-producing region,” said

Director of National Intelligence Michael McConnell, “poses a direct threat to U.S. strategic interests in sub-Saharan Africa.” In fact, the United States imports almost 15 percent of its oil from Nigeria. On the list of U.S. crude-oil suppliers, Nigeria ranks fifth. Another African country with its own recent history of instability, Angola, ranks sixth on that same list.

Esther Pan at the Council on Foreign Relations reports that Nigeria’s oil reserves may approach 40 billion barrels. Angola is pumping 2 million barrels per day. And Equatorial Guinea’s “oil reserves per capita approach and may exceed those of Saudi Arabia.” Gabon, Congo and Sudan also have oil reserves that may prove crucial in the coming decades.

■ **Countering China.** Geopolitics, like nature, abhors a vacuum, and China has been filling the power vacuum in Africa. In McConnell’s understated words, “Beijing still engages in some activities – including arms sales – that could contribute to instability in Africa.”

Pan offers the details: China has provided military equipment and/or training to Equatorial Guinea, Sudan, Ethiopia, Eritrea, Burundi, Tanzania and Zimbabwe. Weapons deliveries have ranged from small arms to combat aircraft. China is also investing billions in Africa’s oil-rich areas: \$2 billion to Angola, \$3 billion to Nigeria and \$10 billion to Sudan, according to Peter Brookes at the Heritage Foundation. Craving stability and resources, Somalia recently granted China oil-exploration rights.

■ **Fighting Islamic radicalism.** China is not America’s only concern in Africa. Hoping to prevent the “Talibanization” of Africa, U.S. forces have been quietly at work there since late 2001. As *The Washington Post* reported in 2005, programs such as the Trans-Sahara Counterterrorism Initiative provide training, equipment and intelligence to militaries in Algeria, Chad, Mauritania, Niger, Senegal, Nigeria, Morocco and Tunisia. *Jane’s Defence Weekly* also reports that elements of the U.S. Army’s 1st Battalion, 3rd Special Forces Group, are in Mali providing some of its soldiers with a five-week training course. The U.S. task



*Soldiers from the U.S. Marine Corps’ 4th Antiterrorism Battalion worked with Ugandan defense forces at the Non-Commissioned Officer’s Academy in Jinja, Uganda, in January. From left to right are Gunnery Sgt. Frederick Sloan, Ugandan chief of training Brig. Gen. Silver Kayemba, Master Sgt. Ronnie Leonard and Gunnery Sgt. Michael Hussey.*

U.S. Marine Corps

force in Djibouti numbers some 2,000 troops, and the Pentagon is expanding its Djibouti base from 97 to nearly 500 acres.

“We are trying to dry up the recruiting pool for al-Qaeda,” as Maj. Gen. Timothy Ghormley, who commanded U.S. forces on the Horn of Africa, told the *Christian Science Monitor* in 2006. “We’re waging peace just as hard as we can.”

Our troops are waging war in Africa with the same blend of ferocity and finesse. Recall last year’s operations in and around Somalia, which saw the U.S. military assist Somali and Ethiopian forces in their battles against jihadists along Africa’s east coast.

■ **Preventing disasters, bolstering democracy.**

A recent report by *The Economist* tallies 11 different peacekeeping missions in Africa. Some are run by the African Union (AU), others by the European Union, and still others by the United Nations. So many missions underscore how fragile and fractured the continent remains, and how important AFRICOM could be to the continent’s future.

The United States has trained 39,000 African peacekeepers since 2005, “over 80 percent of African peacekeepers who are currently deployed,” according to the White House. Thousands of them have been sent to Darfur, the blood-soaked region in Sudan where an estimated 200,000 people have died in what Washington has labeled a “genocide.”



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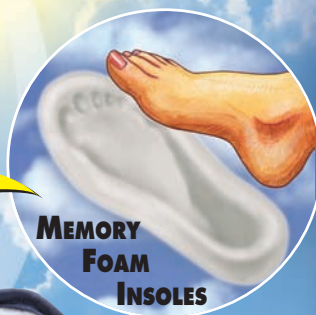
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A recent *Associated Press* analysis found that the United States is spending \$100 million to train and equip AU peacekeepers bound for Sudan. But so far, the U.N.-African Union peacekeeping force has been ineffective in the face of a defiant Sudanese government.

In a grim repeat of what happened in the early 1990s, Western militaries and navies are again escorting aid deliveries bound for Somalia. Indeed, the waters around Africa are lawless, prompting the U.S. Navy and its allies to fight one of the sea's oldest scourges: piracy. Late last year, for instance, the destroyer USS *Porter* sank pirate boats that had hijacked a Japanese tanker. This year, the amphibious landing ship USS *Fort McHenry* led a maritime-security training program in West Africa known as Africa Partnership Station.

Kenya was once considered an African success story. But this year, it spiraled into bloodshed after dubious election results kept the opposition out of power. At least 1,000 people were killed – and a quarter-million displaced – in the resulting chaos. McConnell labeled it “a major setback in a country that had long been among Africa’s most prosperous, peaceful and stable countries.” Indeed, Kenya is a sobering reminder that even Africa’s most stable and progressive countries are only an election away from sliding backward.

Of course, Liberia is a reminder of the opposite – even places where democracy has been trampled can be revived. By invading Liberia and seizing power in the 1990s, warlord Charles Taylor triggered what the State Department calls “one of Africa’s bloodiest civil wars.” It claimed 200,000 lives before regional and international organizations could engineer Taylor’s removal and put Liberia on the path to stability. Backed by the United States and the United Nations, and committed to fighting corruption, Ellen Johnson Sirleaf – Africa’s first democratically elected woman leader – is now leading her country along that path.

Taylor, who supported rebels in neighboring Sierra Leone in yet another civil war that killed 50,000, was exiled to Nigeria and indicted on war-crime charges by courts in Sierra Leone. With regional and international support, the war-torn country conducted free elections in 2007 – one of 50 such elections in Africa over the past four years, President Bush says.

**Triumph and Tragedy.** “Some people believe that we are establishing AFRICOM solely to fight terrorism or to secure oil resources, or to

discourage China,” Whelan has observed. “This is not true.”

But if such objectives aren’t “solely” the new command’s mission, then it is fair to infer they account for at least part of AFRICOM’s mission – and that’s a good thing.

AFRICOM’s multifarious mission is complemented by new development and relief programs:

■ **The Millennium Challenge Account (MCA)** provides grants to countries that fight corruption, govern justly, embrace free markets, and invest in health and education. So far, 21 of the 41 countries approved for MCA grants are in Africa. President Bush notes that “two-thirds of the MCA’s \$5.5 billion is being invested in Africa.”

■ **The President’s Emergency Plan for AIDS Relief (PEPFAR)** was launched in 2003, at a time when only 50,000 people in sub-Saharan Africa were receiving anti-retroviral AIDS drugs. The \$15-billion PEPFAR program now treats 1.4 million Africans. Thirteen of PEPFAR’s 15 focus countries are in Africa. Bush is working with Congress to double the initial U.S. investment, and he has persuaded the Group of Eight (leading industrialized nations) to match Washington’s commitment.

■ **The Africa Growth and Opportunity Act** paved the way for unprecedented U.S.-Africa trade. Imports from sub-Saharan Africa have grown to \$50 billion – six times their 2001 levels – and U.S. exports have doubled to \$14 billion.

■ **The President’s Malaria Initiative**, a \$1.2-billion program, is credited with protecting 25 million people from the malady by distributing bed nets and medicine. Early this year, Bush announced a joint U.S.-Tanzanian effort to distribute another 5.2 million insecticide-treated bed nets.

During his February visit to several countries in Africa, Bush announced a \$350-million initiative over five years to fight against tropical diseases on the continent, such as hookworm and river blindness. He also noted the United States is spending \$17 million to help Ghana fight malaria.

Longtime Africa activist Bob Geldoff has called Bush’s transformational efforts on the continent a “triumph of American policy.” But given the challenges that still loom in Africa, we’re a long way from triumph. The good news is that AFRICOM and these humanitarian programs put the United States in a better position than ever before to prevent the kinds of tragedies that have scarred Africa for generations. 🌿

*Alan W. Dowd is a contributing editor for The American Legion Magazine.*



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# Rescue in



BY RICHARD MINITER

**R**inged by razor-wire barriers, Asadabad is a lonely U.S. outpost in eastern Afghanistan. In June 2005, it was home to the U.S. Marines of the 2nd Battalion, 3rd regiment. The Taliban had welcomed them with a rain of rocket attacks. Every day and night, the base was rocked by mortars and probed with sniper shots. No wonder the Marines called it “A-bad.”

To rid themselves of Taliban forces in the area, led by a warlord named Ahmed Shah, the Marines put together Operation Red Wings, then called on the Navy SEALs based near Kabul.

That fateful call set in motion the bloodiest battle in the 45-year history of the SEALs, the largest air search-and-rescue mission since the Vietnam War, and yielded the first Medal of Honor for a SEAL in the war on terrorism.

Senior Crew Chief Dan Healy was in charge of planning the SEAL component of Operation Red Wings. A legend among SEALs in Hawaii and California, Healy was a few months into his first deployment in Afghanistan. Working out of a cubicle choked with maps and intelligence reports, he became obsessed with finding the Taliban warlord killing Marines in A-bad.

On the morning of June 27, Healy called together four members of SEAL Team 10: communications officer Dan Dietz, sniper Matthew Axelson, medic Marcus Luttrell and Lt. Michael Murphy, the unit’s commanding officer.

Raised in Littleton, Colo., Dietz had recently married his wife, Maria. She went by the nickname “Patsy” and was madly in love with Dan. As a youngster, Dietz wanted to be a ninja until he found out it wasn’t really a profession. After becoming a SEAL, he slept through his alarm one morning. As Dietz rushed in late for duty, he impressed everyone with his abject apology and even volunteered his own punishment.

Matthew Axelson was the sniper. “Axe,” as the team called him, was a quiet high achiever whose family lived off an equally quiet cul-de-sac in suburban Cupertino, Calif. His plan was to serve

his country until he turned 25 and then become a schoolteacher in Chico. His wife, Cindy, was impressed by his humility. When people asked Axelson what he did, he would just say he was “in the Navy.” Besides golf, good beer and California, Axelson loved being a SEAL.

From the small ranch town of Willis, Texas, medic Marcus Luttrell had trained since he was 15 to join the SEALs. He ran for hours with concrete blocks on both shoulders. He and his twin brother, Morgan, both dreamed of becoming SEALs, and they both made it. Later, the twins commissioned a special tattoo: each would have half of the SEAL trident tattooed on his back.

Lt. Michael Murphy, the team’s commander, hailed from Patchogue, N.Y. He stitched a patch from the New York City Fire Department inside his uniform. He proposed to his fiancée, Heather Duggan, under the Rockefeller Center Christmas tree in 2003. The couple planned to marry as soon as he returned from Afghanistan.

The plan was simple. A helicopter would drop off the SEAL team a few miles from a village where the warlord Shah had been sighted from the air. They would rope down and find a concealed position. If they spotted Shah, they would radio “eyes on target” and an 80-man force would swoop in to capture or kill him.

With their weapons and gear, the four SEALs boarded a U.S. Army 160th Special Aviation helicopter, and it thundered off toward the drop zone: a field of waist-high grass and rotting stumps. The men slid down ropes from the hovering chopper, then waited in frozen silence for 15 long minutes, listening for enemy movement. They heard only wind and the rattle of tree branches.

As a storm moved in, the SEALs lined up and hiked into the tree line. Using a special GPS, they found their way to a rocky nook overlooking the sleeping village. Then storm winds pushed in a thick, gravy-like fog that cut off the team’s view of the village. They had to move – a dangerous decision so close to a Taliban stronghold.

# Afghanistan

Murphy found a finger of rock that looked down on the target – a perfect observation post, but a risky one. If they were attacked from behind, they could be trapped. Still, they settled in, hiding under brush and fallen trees. Shortly after dawn, the SEALs heard an eerie noise, a sort of tinkling sound that grew louder. Goats. Hundreds of them, with bells around their necks, flooded down the slope. Then came the shepherds, two greybeards and a boy, driving the flock right into the SEALs. In a flash, Murphy and his men captured them.

Now came a painful choice. Shepherds often spy for the Taliban. The team briefly considered shooting them, but they decided against it. “We are not murderers,” Murphy said. He ordered the prisoners to be released.

As soon as the shepherds were gone, the SEALs ran over rocks and stumps, scaling the slope to their old location. They had to find a defensive position before the enemy found them.

The Taliban were not long in coming. Initial intelligence reports put Shah’s forces at 80 fighters, but some 200 Taliban appeared on the ridges above them. The enemy held the high ground and started flanking the SEAL team on both sides; they were about to be surrounded.

Luttrell began firing, followed quickly by Axelson and Dietz. Excellent marksmen, the men started dropping the turbaned fighters. Still, they were outnumbered 50 to one. Wood splintered all around them as the Taliban sprayed AK-47 fire. The SEALs couldn’t hold out for long. The radio only spoke static. They couldn’t phone home.

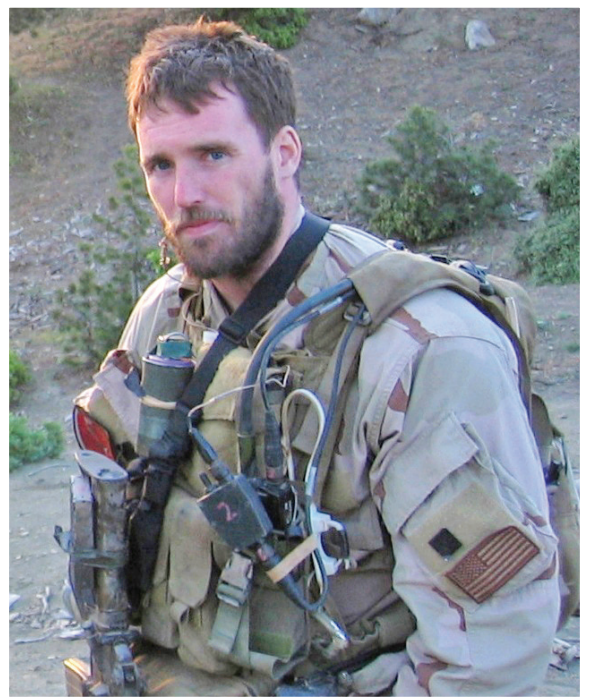
Murphy ordered them to retreat down the hill, gaining distance and time. But the Taliban pursued their prey relentlessly.

In a singular act of bravery, Dietz volunteered to climb to a nearby slope to get a radio signal out of the narrow, jagged valley. He ran up a parallel steep slope as bullets made the dirt jump behind his steps. At the top, he frantically worked the radio. A stray shot took off his right thumb. More bullets pulverized the radio. Most likely, Dietz took at least two shots as he scrambled down the mountain to rejoin the team. Without medical treatment, he would die within an hour. Still, he kept firing at the ever-closer enemy.

Without an air rescue, or close-air support from a plane, the SEAL team would die. The radio was gone, but Murphy had his cell phone. Stepping out of cover, the lieutenant walked into the open for a clear signal. He knew the enemy only needed seconds to target him. Murphy punched in the number for the SEAL command post at Bagram Air

## Murphy’s Medal of Honor

In a White House ceremony last October, President Bush presented a Medal of Honor posthumously to the grieving parents of Navy Lt. Michael P. Murphy. The 29-year-old officer died June 28, 2005, during combat operations in Afghanistan. He was the fourth Navy SEAL to be awarded the Medal of Honor, the first since the Vietnam War, and the first U.S. servicemember in Afghanistan to receive the nation’s highest award for heroism. In a private meeting before the ceremony, Dan and Maureen Murphy gave the president a gold dog tag as a tribute to their son. Murphy is buried at Calverton National Cemetery in New York.



Base, and managed to report their dire situation right before a bullet tore his right side. Help was on the way. Somehow, he summoned the strength to respond, “Roger that, sir. Thank you.” As Murphy staggered back to his men, bullets rained down on him. Bleeding and dying, he had given his men a chance.

No matter the pain, the SEALs had to keep moving and shooting. They scrambled and stumbled down the hills, stopping only to fire back at their pursuers. It would take almost an hour for help to arrive – an eternity in battle. Would their ammunition and luck hold?

Back at Bagram, Lt. Cmdr. Michael McGreevy instantly approved a daylight rescue, though standard procedure was to fly helicopters only at night, when they were less vulnerable to ground



"For conspicuous gallantry and intrepidity at the risk of his life above and beyond the call of duty as the leader of a special reconnaissance element with Naval Special Warfare Task Unit Afghanistan on 27 and 28 June 2005. While leading a mission to locate a high-level anti-coalition militia leader, Lieutenant Murphy demonstrated extraordinary heroism in the face of grave danger in the vicinity of Asadabad, Konar Province, Afghanistan. On 28 June 2005, operating in an extremely rugged enemy-controlled area, Lieutenant Murphy's team was discovered by anti-coalition militia sympathizers, who revealed their position to Taliban fighters. As a result, between 30 and 40 enemy fighters besieged his four-member team. Demonstrating exceptional resolve, Lieutenant Murphy valiantly led his men in engaging the large enemy force. The ensuing fierce firefight resulted in numerous enemy casualties, as well as the wounding of all four members of the team. Ignoring his own wounds and demonstrating exceptional composure, Lieutenant Murphy continued to lead and encourage his men. When the primary communicator fell mortally wounded, Lieutenant Murphy repeatedly attempted to call for assistance for his beleaguered teammates. Realizing the impossibility of communicating in the extreme terrain, and in the face of almost certain death, he fought his way into open terrain to gain a better position to transmit a call. This deliberate, heroic act deprived him of cover, exposing him to direct enemy fire. Finally achieving contact with his headquarters, Lieutenant Murphy maintained his exposed position while he provided his location and requested immediate support for his team. In his final act of bravery, he continued to engage the enemy until he was mortally wounded, gallantly giving his life for his country and for the cause of freedom. By his selfless leadership, courageous actions, and extraordinary devotion to duty, Lieutenant Murphy reflected great credit upon himself and upheld the highest traditions of the United States Naval Service."

fire. No one disagreed with his decision. They knew the stakes. He burst out of the SEAL command, almost bowling someone over. "They're in a TIC!" McGreevy yelled – "troops in contact," or a battle to the death.

McGreevy ran into the barracks to round up any SEALs or Night Stalkers (elite Army units) he could find. The men sprang into action, grabbing gear and guns while running for the door. Onboard trucks heading for the airfield, sergeants divided men into "chalks," and Healy counted heads. The posse was coming. Rotors already turned on the lead helicopter as the men clamored onboard. Healy said to a nearby enlisted SEAL, "Get off. I outrank you." Friends say it was typical Healy. He was taking charge, consumed with saving the lives of his men.

Four helicopters beat into the sky, climbing at top speed. Less than 20 minutes later, the pilot had bad news. The two Black Hawks, including Healy's, were too heavy to vault over the peaks of Afghanistan's eastern Konar province. As precious minutes ticked past, the choppers diverted to Jalalabad, where 16 men were ordered off the Black Hawks. With more than 10 minutes lost, the two helicopters decided to outrun their slower, armored escorts. Contact with the trapped SEAL team had been lost. There was no time to spare.

Soon, they were in the landing zone. The lead chopper moved into position, and the SEALs and Night Stalkers stood up to rope down from the helicopter. No one saw the two-man Taliban crew load a rocket-propelled grenade launcher. In less than a second, the grenade found its mark and a fireball erupted inside the helicopter.

The SEALs onboard the second Black Hawk were horrified to see the lead chopper explode, tilt its nose upward and spill men to the ground. The remaining air crew, belted in, were trapped inside a flaming comet, plunging down into a boulder-choked ravine. Healy, McGreevy and a dozen others were gone.

Inside the second helicopter, the SEALs desperately wanted to land and make the enemy pay. But the radio gave different orders: leave now. No one had to explain. They had lost one aircraft and 16 men, and weren't going to lose another. Full of silent, angry and sad men, the second helicopter flew home.

As night fell, the SEALs planned another rescue mission for their comrades. Survivors would be saved and the fallen would be taken home with honor. The agonizing mystery: no one knew the fate of the men on the ground.

Gloating, Ahmed Shah phoned *The News*, a daily in Islamabad, Pakistan. He said his men had killed five commandos and brought down a helicopter. He would release a video soon. The news reached the United States the morning of June 29. No names were released. As the rest of the country prepared for July Fourth weekend, several frantic families waited for news of their loved ones.

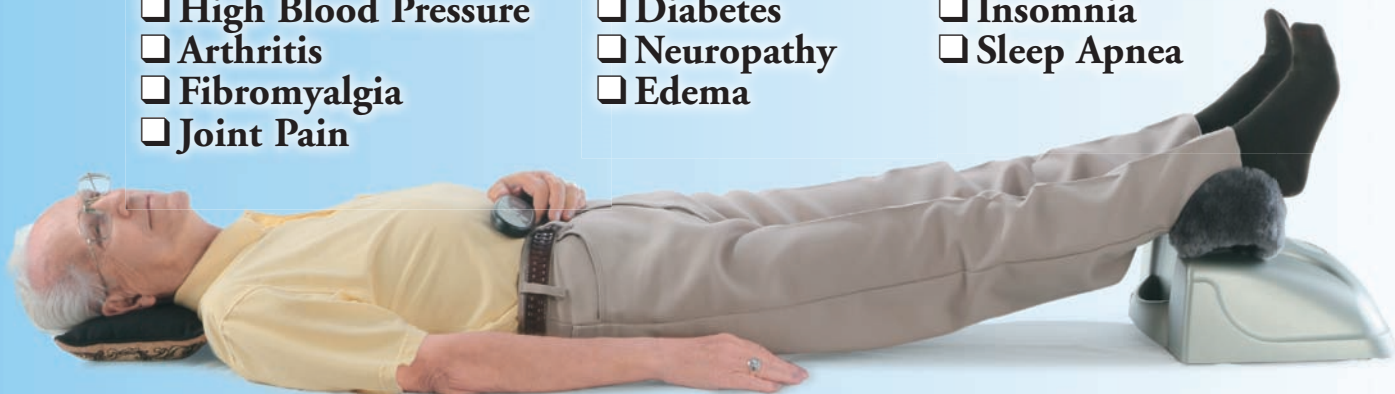
Back in Asadabad, rescue teams had landed and were marching toward the crash site and the ground team's last known position. Nearly every type of U.S. Special Forces – Rangers, Night Stalkers, SEALs – joined the mission. Afghan Special Forces provided translators and guides. Overhead, Navy and Air Force planes filled the sky, searching for the missing Americans and pounding enemy positions. The cavalry had come.

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- ☐ High Blood Pressure
- ☐ Arthritis
- ☐ Fibromyalgia
- ☐ Joint Pain

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- ☐ Back Pain
- ☐ Diabetes
- ☐ Neuropathy
- ☐ Edema

- ☐ Stiff Muscles
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# What people are saying about the Exerciser 2000 Elite™

After using the Exerciser 2000 Elite™ twice a day for one week the swelling in my ankles went away. It has also helped my breathing, as I can get out and walk without having to stop and catch my breath! Thank you. —*Shirley H., Florida*

As a Chiropractor, I would like to say that the Exerciser 2000 Elite™ enables people to benefit themselves at home. It is a valuable asset in moving lymph fluid, oxygenating the blood, increasing immune system function, maintaining mobility in the spine, and additionally freeing up a spine that has become stiff and arthritic. —*Garry Gorsuch, D.C.*

The ad I saw almost sounded "too good to be true". With your no risk money back guarantee I figured I had nothing to lose so I purchased the machine... and boy, am I glad I did! I am 75 years old and suffer from sciatica, which makes my back and legs tighten up and causes numbness. I was taking 8-10 Aleve™ every day. After using the machine for only 4 minutes, I noticed my lower back loosening up. Since I have been using the machine I haven't taken any pain pills and have been pain free. My sciatica is not giving me problems anymore and my body stays loosened up. I have also had a snoring problem for quite some time, however, since using the machine my snoring has subsided. My wife is so excited! I cannot tell you how much this machine has turned my life around. —*C. Cummings*

After having a stroke, I could no longer exercise the way I used to. As a result, I developed edema. A friend of mine introduced me to the Exerciser 2000 Elite™. I loved it and I purchased one for myself. After using the machine daily for a few weeks, my symptoms of edema were completely gone. I now use the machine twice a day for 16 minutes each time on speed 3. What a wonderful way to exercise. —*Robert M.*

I love using the Exerciser 2000 Elite™ after my morning workout. It is an excellent way to cool down and it helps to start my day off right. —*Deanna C., Kansas*

I have had constipation problems for over 25 years. Since I have been using the Exerciser 2000 Elite™ I have been regular every day and have begun to lose weight. This is truly a blessing and is so easy to use. —*Jeannie*

I am in my late 80's and have diabetes. The first thing I noticed when I started using my machine was that my feet were warm when I went to bed. They were always ice cold before. Because one of my problems is poor circulation, I use the machine three times a day for 10 minutes each; in the morning, late afternoon and just before bed. I almost forgot to mention that I have not been able to lift my arms above my head. Now I can do it. You think that's no big deal until you can't do it anymore. —*Ralph K.*

My husband and I have been into natural products all of our lives but nothing has ever affected us like the Exerciser 2000 Elite™. My husband is 72 and delivers flowers. He carries 5 gallon buckets of water. Since using the machine, his back hasn't hurt him at all. My hips would hurt if I stood too long and I would get weak and have to sit down. Now I can walk and sit as long as I want. I don't take pain medication anymore. In the morning, when I get out of bed I'm not stiff anymore. At 65, wow, this is great! Thank you for offering such a great machine. We are going to tell everyone we know about it. —*Cheryl J.*

I had suffered with sleep apnea for many years and had been taking drugs for it. I was told I would have to use a breathing apparatus. In the meantime, I was introduced to the Exerciser 2000 Elite™ and decided to purchase one. Within two weeks, I was sleeping more deeply and restfully than ever before. —*David B.*

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*From left to right, Sonar Technician (Surface) 2nd Class Matthew G. Axelson of Cupertino, Calif.; Senior Chief Information Systems Technician Daniel R. Healy of Exeter, N.H.; Quartermaster 2nd Class James Suh of Deerfield Beach, Fla.; Hospital Corpsman 2nd Class Marcus Luttrell of Willis, Texas; Machinist's Mate 2nd Class Eric S. Patton of Boulder City, Nev.; and Lt. Michael P. Murphy of Patchogue, N.Y. All but Luttrell were killed by enemy forces June 28, 2005, during Operation Red Wings. U.S. Navy*

On the ground, Luttrell climbed through the brush. Alone and burning with thirst, he had spent the night hiding in a shallow cave as Taliban footsteps crunched around him. He had no way to contact the Americans flying overhead. If he showed himself, the Taliban would shoot him before they could land.

Dizzy and blurry-eyed, Luttrell collapsed on a mountain trail. He stirred as a shadow covered him. He looked up at a bearded shepherd. The man gave him a thumbs-up sign. Should he trust him? Could he? Luttrell snatched a hand grenade off his vest and pulled the pin. Only the Texan's thumb prevented the explosion. Undaunted, the man helped Luttrell to his feet. Together, they lurched toward the village of Sabray, where Luttrell was deposited on a heap of cushions in a stone hut.

Under heavy fire, rescuers scoured the battlefield. Within two days, they found Dietz. His autopsy report later revealed he had 16 mortal wounds and many others. He had died fighting, killing at least a score of Taliban. Nearby, they found Murphy. Riddled with bullets, he, too, had died a warrior.

As the search went on, the Taliban seemed to hide behind every tree, squeezing off a few shots and running. But they were being beaten back. The Americans had arrived in force.

All the men lost on the helicopter were recovered by July 3. Their bodies were respectfully prepared for transport to the United States, as the search continued for Axelson and Luttrell. Could they still be alive?

On July 4, in Willis, Texas, the phone rang. Holly Luttrell answered it, fearing the worst. She listened intently and then told her friends the good news: her husband was alive. One friend, Lt. J.J. Jones, ran into the yard, asking the crowd of relatives, neighbors and SEALs to be quiet. Then he shouted, "They got him, guys! Marcus has been rescued!"

Luttrell was taken to safety by helicopter, then flown to Landstuhl Regional Medical Center in Germany for emergency medical treatment.

Still, the SEALs kept searching for Axelson. They found him July 10, among fallen timber. His distance from the other SEALs indicated that he had kept fighting, alone, for perhaps an hour. The Taliban found him incredibly difficult to kill.

Operation Red Wings and the rescue effort broke the back of the Taliban in Afghanistan's eastern Konar province.

In August 2005, the Marines launched Operation Whalers to destroy Taliban remnants. The 18-day campaign of mountain battles drove the last of Shah's men into Pakistan. As a result of the sacrifice made by the SEALs, Night Stalkers, Rangers and Marines, the people of Konar province were able to vote in that September's parliamentary elections – the first elections in decades.

Shah reportedly died in Pakistan in 2006, in a shoot-out with a villager.

Luttrell, Dietz and Axelson received the Navy Cross, the nation's second-highest decoration for valor. A memorial for Healy was conducted in Exeter, N.H., on July 17, which would have been his 37th birthday; the funeral procession was a mile long.

In a White House ceremony last October, President Bush awarded Murphy the Medal of Honor; his parents tearfully accepted it on his behalf. On Nov. 27, Murphy's grave at Calverton National Cemetery in New York received a special Medal of Honor headstone.

These brave men who lost their lives will not be forgotten. 🌿

*Richard Miniter is the author of two New York Times best-selling books, "Losing bin Laden" and "Shadow War." He is an internationally recognized expert on terrorism.*



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# TRAUMATIC BRAIN INJURY

Traumatic brain injury is nothing new. Called the “silent epidemic,” TBI actually cries out in a chorus of mysterious and unwelcome voices – headaches, memory loss, poor concentration, mood swings, nausea, dizziness. And that’s just a mild injury. The worst TBIs can cause radical personality changes, chronic pain, loss of senses, slurred speech, seizures or even paralysis.

Until Phineas Gage had an iron rod pass through his skull in 1848 and managed to survive the ordeal, we knew little about the relationship between brain and behavior. After his injury, the friendly, soft-spoken railroad worker turned rude and crude, barely recognizable to friends. “Gage was no longer Gage,” they said. But his case proved that specific regions of the brain are responsible for specific functions and traits, and triggered thousands of discoveries in the field of neurology.

These discoveries can’t, and won’t, prevent people from conking their heads. About 1.5 million Americans sustain a TBI every year in falls, car accidents and assaults. As recently as the 1960s, 90 percent of these patients died. Computer-assisted imaging techniques such as CT scans and MRIs now offer them phenomenally better odds, helping doctors identify methods of treatment and rehabilitation.

Further advances can’t come soon enough. As the signature wound of the Iraq war, traumatic brain injury is getting more attention than ever. TBI is described as the new PTSD – a handy acronym for a condition, usually explosion-related, affecting thousands of combat soldiers.

TBI can be a life-changing monster. Once-healthy young men are suddenly anxious, impulsive, sensitive to noise and light, unable to do simple problem-solving; prone to emotional outbursts. As they battle these demons, their parents and spouses are thrust into the difficult role of caregiver, mourning what sometimes feels like the loss of the person they once knew and loved.

Every war has had its share of TBI.

Today, however, the condition has ascended to unprecedented levels of awareness because of blast trauma sustained in Iraq and Afghanistan, where improvised explosive devices and rocket-propelled grenades are the enemies’ preferred weapons. And more TBI cases than ever are coming home alive. Due to advances in body armor and helmet technology, improved medic training and quick evac, the injury-to-death ratio is 16-to-1. But the price of surviving an explosion can be high. The pressure wave of an IED blast wreaks havoc with air-filled organs such as the ears, lungs and gastrointestinal tract, along with those surrounded by fluid-filled cavities, like the brain and spine.

Often accompanied by burns, organ damage, and blunt or penetrating injury, this is not the TBI of wars past.

The high number of Iraq and Afghanistan survivors has led to a rewiring of VA medical care at nearly every level. Everyone receiving VA care is now screened for TBI, and those who test positive are offered follow-up evaluations that include injury histories, physical exams targeted to the symptoms, and checklists to assess the presence and severity of symptoms associated with mild TBI. What VA still lacks, according to a recent Government Accountability Office study, is an objective diagnostic test that definitively identifies mild TBI, which shares symptoms with PTSD.

Last July, the President’s Commission on Care for America’s Returning





Wounded Warriors, led by former U.S. Sen. Bob Dole and former Secretary of Health and Human Services Donna Shalala, called for aggressive prevention and treatment of TBI. The report called upon the Department of Defense to arrange a network of public and private-sector expertise in TBI, so that prevention, diagnosis and treatment will “stay current with the changing science base.” Specifically, the commission recommended comprehensive training programs in TBI for military leaders, VA and DoD medical personnel, family members and caregivers. Where no TBI clinical practice guidelines exist, DoD and VA should work with other national experts to develop them, the commission recommended.

In testimony before the House and Senate Veterans Affairs committees last fall, American Legion National Commander Marty Conatser drew attention to the obstacles faced by combat TBI veterans and their families, including the absence of VA rehabilitative care in many communities. “They have sacrificed financially, have lost jobs that provided the sole income for the family, and have endured extended separations from children,” he said.

That testimony is illustrative of how TBI, the signature wound of today’s war, has caught the attention of veter-

ans, the public, Congress, the administration, VA and DoD like never before. The attention is not only fueled by an interest America always takes in wartime sacrifices. Our nation’s focus on TBI reaches even deeper than that, into the mysterious engine of human knowledge, toward what we know and don’t know about our own brains.

Medical researchers break new ground every day, much of it connected to VA and some of it funded by The American Legion. The field of neurology stands at a threshold of discovery unseen since the days of Phineas Gage.

In the following pages, *The American Legion Magazine* offers just some of what we are learning from the trauma of wartime brain injury, which is advancing a field of study that one scientist describes as “a continuous integration” of discouragements and excitements. For scientists and sufferers alike, it is a journey whose destination remains unknown, and progress is measured in milliseconds, one synapse at a time.

– Matt Grills

“People think this is new. It’s not. Go back to World War I. Same kind of discussion back then. We need to figure this out. VA and DoD are going to work very closely on this. There is tremendous synergy on this.”

Dr. James B. Peake,  
secretary of VA,  
in a recent interview  
with *The American  
Legion Magazine*



ILLUSTRATIONS: SCOTT HOLLADAY



# 'BETTER AND BETTER AND BETTER'

*IED-wounded veteran defies the odds in his battle with TBI.*

SIGNATURE  
WOUND  
OF THE  
WAR

The young man in striped hospital pajamas grins at the camera, his Bronze Star citation in one hand, Purple Heart in the other. Something is gravely wrong with this picture.

About a quarter of the man's head is missing. That he could even be alive, the way the curve of his skull sharply gives way to a sudden 45-degree angle, seems impossible. That was the picture of Portray Woods in 2004. Since then, nearly everything has changed.

Woods has spent the past four years redefining the possibilities for recovery from severe traumatic brain injury. The 36-year-old retired Army sergeant first class was wounded on April 18, 2004, when a roadside bomb turned him from a strapping former college basketball player into a comatose amputee missing his right arm, left thumb and a quarter of his head. He was not expected to recover. He listened to doctors speak of his grim prognosis and grew frustrated, unable to speak out in protest. He remembers his young daughter singing to him at the Minneapolis VA Medical Center. He remembers his own first words after the TBI, to his mother who was constantly at his side after the injury. He remembers every step on the road to getting "better and better and better."

In time, through perseverance, family support and help from VA, he talked again, walked again, and proved to all around him just what's possible for those with TBI. "Portray is awesome," says Robin Paul, one of his health-care providers at Roudebush VA Medical Center in Indianapolis. "If I could multiply him by 100, that would be great."

During the past year, the father of two has begun working on a volunteer basis at the VA medical center and travels the state as a public speaker, telling his story of triumph over TBI. His goal is to write a book about the experience and share a message of hope to a broader audience. He recently spoke with *The American Legion Magazine*.



**Q:** How were you wounded?

**A:** I was riding in a Humvee, and an IED hit me. I was in a coma for two months. I couldn't remember nothing at all. I don't know what happened. Then, the first thing I remember was my little daughter singing to me. "You Are My Sunshine." And I smiled. Then I looked down and saw my arm was missing. Now, I couldn't talk. I looked down, and it's like, "Aw, man ...." Then I saw my thumb. It's like, "Man, what's going on?" I never did see my whole picture, my head. Then they took pictures of me ... how I was looking. I had a "trach" – a tube in my throat.

**Q:** At least you knew you were alive.

**A:** I heard them talking, saying I would never walk, I would never talk. I had 15-percent chance of living. I couldn't say anything. It made me mad. It made me perform.

**Q:** You knew at that point you had a long way to go.

**A:** Yeah, but I got better. I went to OT – speech – to try and get better. They said, "Say A."

I couldn't say "A." It was like "uhh, uhh."

They said, "Don't worry about it ... take your time." I got better and better and better.

Then I went to Walter Reed, this time to work on my brain injury. My head got all fixed up (cranio-

## The Time of TBI

### 1992

> DoD and VA launch the Defense and Veterans Head Injury Program, which later becomes the Defense and Veterans Brain Injury Center.

### 2005

> VA establishes the Polytrauma and Blast-Related Injury Quality Enhancement Research Initiative to promote the successful rehabilitation of veterans with TBI and other blast-related injuries.

### 2006

> VA, DoD and other partners inaugurate the Center for the Imaging of Neurodegenerative Diseases at the San Francisco VA Medical Center, where researchers study TBI as well as conditions such as Alzheimer's and Gulf War illness.



plasty). What happened was my head was lopsided. They fixed it up. I was blind in one eye.

**Q:** *Can you see through that eye now?*

**A:** Yes, I'm good to go.

**Q:** *You lost an entire portion of your brain.*

**A:** I sure did. My head got all messed up. Staples and all kinds of stuff. I can't smell either. People don't know that. I put on cologne, and people will say, "That smells good." I say, "Thank you," but I don't know what it smells like.

**Q:** *You couldn't see much, walk at all, or talk.*

**A:** Yeah, I was scared. What got me the most was my family. They came to see me all the time. I mean *all the time*. I was happy because they were with me. And I saw my kids. Dameir was 4 years old, and Jayden was only 1 and a half, turning 2.

**Q:** *How did being a parent affect your recovery?*

**A:** I thought about it all the time. I was determined. I thought, "Let me do it for my kids." And I got better and better and better. I thank my kids all the time.

I was sad at first. They grabbed my arm and they saw my hand was missing. I couldn't talk ... couldn't tell them I love them. My mother talked for me. Jayden, he was real scared. Now, they understand what happened.

**Q:** *Your mother was there when you first spoke again. What did you say?*

**A:** My mom said, "Say something to me ... say something to me." My mother was with me the whole time. I told my mother, "I love you."

**Q:** *What about other family members?*

**A:** My older brother. He told me to get up and walk. I was in a wheelchair. He said, "Get up and walk."

I just looked at him. "I ain't going nowhere."  
He said, "Get up and walk."

I was in a wheelchair. I said, "I can't walk."

He said, "Get up."

We're just looking at each other, and I said, "I ain't movin'."

He said, "I ain't movin' either. We ain't doing nothing until you walk."

We just looked at each other. Then I said, "Oh man ... OK ... Let me try to get up." I got up out of my wheelchair. It took a long time. But I started walking. That made him happy. So happy.

**Q:** *The problem was just that your brain was not able to send signals to your legs?*

**A:** Exactly. I was paralyzed in the knee, but then I started walking.

**Q:** *That was four years ago. Describe the process.*

**A:** Really slow.

**Q:** *You could have gotten depressed. Did you?*

**A:** When I got divorced, I got really mad. I couldn't talk at that time. I wanted to say something, but I couldn't talk. My mother was doing everything for me, and that made me mad. But after that, I began doing a lot better. I get my kids six times a year, and I'm happy, very happy.

**Q:** *Have soldiers from your unit stayed in touch?*

**A:** All the time. One just called me today. One staff sergeant got married in Maryland. I went to see his wedding. But there was a moment there, when they told me, "Seven people you trained had died." I went outside to cry.

**Q:** *Today, you own a home, mow your lawn, operate a computer, hold down a job, you have a place in the lives of your kids. And you have a message for others who have TBI.*

**A:** I tell them, "Do not give up." Look at me. I came a long way. Some people, when something bad happens, they want to get out. I tell them *my* truth. My truth is that I love the Army, and I'd go back. My message is that I did it. You could, too.

– Jeff Stoffer

**2007**

> VA initiates routine TBI screening for all veterans who served in Iraq or Afghanistan.

> VA establishes the Center of Excellence for Research on Returning War Veterans, based at the Central Texas Veterans Healthcare System, to study TBI and other brain and mental-health conditions.

> VA funds a \$4.2 million partnership with the University of Texas at Austin to study brain injuries among U.S. troops.

> DoD establishes the Defense Center of Excellence for Psychological Health and Traumatic Brain Injury, which will incorporate the Defense and Veterans Brain Injury Center, set to be fully operational by October 2009.

**2008**

> VA conducts a state-of-the-art conference on TBI to help advance research and care.

# MACRO TO MICRO

*Scientists explore the inner reaches of brain chemistry to treat TBI.*

SIGNATURE  
WOUND  
OF THE  
WAR

When a U.S. soldier sustains a severe head wound in Iraq, battlefield surgeons may remove a large portion of the individual's skull and tuck it inside the abdomen for safe transportation. This seemingly radical but completely routine procedure to relieve brain swelling – a decompressive craniotomy – was controversial 20 years ago, says Dr. Kim Burchiel, chairman of the Neurological Surgery Department at Oregon Science & Health University in Portland. Today, that treatment saves lives and minds.

From that point forward, doctors are working to shift their treatment of TBI to microscopic levels. Scientists are trying to find a drug, gene therapy or molecular treatment to prevent ongoing damage to brain cells in the hours following a roadside bomb blast, a shrapnel wound or other head injury.

"This secondary injury causes serious damage," says Burchiel, whose team runs the largest neurological intensive-care unit in the Pacific Northwest. "We have hours, or days, to intervene. These are people we can possibly save."

Consider a soldier who sustains a traumatic brain injury as a result of the shock wave from an improvised explosive device. A brain scan may show relatively little damage, but the trauma from the shock wave causes the soldier's body to send a flood of sodium into his brain cells, which prompts the release of massive amounts of calcium and initiates apoptosis. The brain cells self-destruct.

"When we get high levels of calcium in a cell, it turns on certain genes," says Dr. Ramona Hicks, a program director who specializes in traumatic brain injury research at the National Institutes of Health. In some cases after TBI, genes go to work repairing the brain. In other cases, they trigger apoptosis. The self-destruction process may be caused by genes programmed to act on the notion that it's better to have a dead brain cell than a malfunctioning brain cell, Hicks says.

Scientists are experimenting with a number of treatments to stop this brain-cell suicide, including drugs to block the flow of calcium.

Another specialized approach using drugs involves giving the injured patient erythropoietin, better known in recent years as an illegal blood-doping substance that enhances athletic performance. Erythropoietin increases the amount of



Amy C. Elliott

## COMING TO

*Veteran doctor revives patients from comas thought to be permanent.*

A 65-year-old Virginia business executive slipped into a coma a few years ago after complications from open-heart surgery. Doctors told his family he would never regain consciousness. Dr. Philip A. DeFina proved them wrong.

Using specialized treatment techniques, including electric brain stimulation and drugs, DeFina and his team revived the patient. The man has since regained his ability to speak and is resuming a normal life. As a result, his family donated money to start the International Brain Research Foundation in New York, which draws upon the expertise of more than 100 neuroscientists and clinicians around the world.

Since that first success, DeFina and his colleagues have revived no fewer than 15 pa-

oxygen to the brain, potentially enhancing healing.

Relatively common hormones may help. Progesterone's anti-inflammatory properties may reduce swelling of an injured brain. The hormone also may influence other molecular pathways to block injury and stimulate repair, Hicks says.

Some TBIs appear to damage a part of the nerve cell called an axon. Axons enable nerve cells to communicate with other nerve cells. Experiments suggest cyclosporine A, a drug normally used to prevent the body from rejecting an organ



tients from comas, including two soldiers who suffered traumatic brain injuries in Iraq and one who was injured in a motorcycle accident in the United States. They have now launched a six-bed treatment effort called the Severe Disorders of Consciousness Program at Kessler Institute for Rehabilitation in West Orange, N.J.

DeFina, an Army veteran, recently spoke with *The American Legion Magazine*.

**Q:** *Could you explain how your treatment works?*

**A:** In essence, we are reprogramming the brain's function through the manipulation of brain chemistry and electrical activity. We use electronic stimulators to send signals back into the brain. This increases blood flow, which increases both the amount of oxygen delivered to the brain and glucose metabolism. We think this helps preserve areas of the brain that have been shut down as a result of an injury until they can be reintegrated with the rest of the brain. We're borrowing medications from the treatment of depression, anxiety and Parkinson's disease along with high-potency vitamins and herbs to stabilize the brain and enable it to produce needed chemicals on its own. Finally we use neurofeedback – which is like biofeedback to the brain – to reprogram and restore the brain's ability to become active again.

**Q:** *How safe is it?*

**A:** We have not had any significant side effects from their use. All of these techniques are approved by the FDA for other things. We modified them and refined them to treat disorders of consciousness – that is, patients who are in a coma, vegetative state or in a minimally conscious state. This is called “off-label” use. For example, we're using commercially available stimulators designed to treat neuromuscular problems to stimulate the brain.

transplant, blocks destructive changes in the brain and promotes cell repair. Cyclosporine A helps restore natural calcium levels in traumatized brain cells.

Despite all the advances, many efforts have failed. “Over 25 large clinical trials have looked at drugs designed to help restore brain function after traumatic brain injury,” Hicks says. “To the disappointment of everyone, they have all failed.”

No single treatment will ever address the complex problems of TBI and its aftermath. The Na-

**Q:** *What kind of attention is your work getting?*

**A:** Every time we wake someone up or improve someone's level of consciousness, it's looked at as anecdotal. I tell people to come and visit us – see we what we do firsthand.

**Q:** *How did you come to treat your first veteran?*

**A:** The mother of a soldier who was injured in a mortar attack contacted us. He suffered a severe brain injury, and the loss of oxygen to his brain and had gone from a coma to a vegetative state – where he was slightly less impaired – at different points in time. We saw him about a year and a half after his injury. A retired general said years ago they would have given him morphine and sent him home in a body bag. Not only were we able to arouse him, we were able to compensate in terms of rewiring his right and left (brain) hemispheres for language ability. Before he left, he was able to hit a button for yes-and-no responses with 80 to 90 percent accuracy.

**Q:** *How are the other two soldiers progressing?*

**A:** The soldier who was injured in the motorcycle accident is communicating with us by double blinking and hand squeezing. The other soldier has a lot of complications, and his prognosis is much slower at this point.

**Q:** *Can you treat all brain-injury patients?*

**A:** Despite the fact we've had such incredible success, no treatment program will be able to help everyone. But we are developing diagnostic techniques and treatments that give these patients a higher probability of recovery. And I think we could probably help bring a number of severely injured soldiers back to consciousness.

– Ken Olsen

tional Institutes of Health is exploring the idea that a combination of treatments – much like the multiple treatments used to treat cancer and AIDS – could more effectively handle brain injuries.

The best TBI strategy at hand, Burchiel says, is probably the most fundamental. “As scientists continue to search for solutions, good surgical care, good pulmonary therapy (because of the risk of pneumonia), and good nutrition make a huge difference in survival of brain-injury patients.”

– Ken Olsen



# BRAINS & BLASTS

Enemy use of improvised explosive devices has led to a surge in TBI cases, ranging from mild to severe, representing approximately 80 percent of all war casualties.

## Symptoms of TBI

**Headaches or neck pain** that do not go away

**Difficulty remembering,** concentrating, deciding

**Slowness** in thinking, speaking, acting or reading

**Getting lost** or easily confused

**Feeling tired all the time,** having no energy or motivation

**Mood changes** (feeling angry or sad for no reason)

**Changes in sleep patterns** (sleeping a lot more or having a hard time sleeping)

**Lightheadedness,** dizziness, loss of balance

**Urge to vomit,** nausea

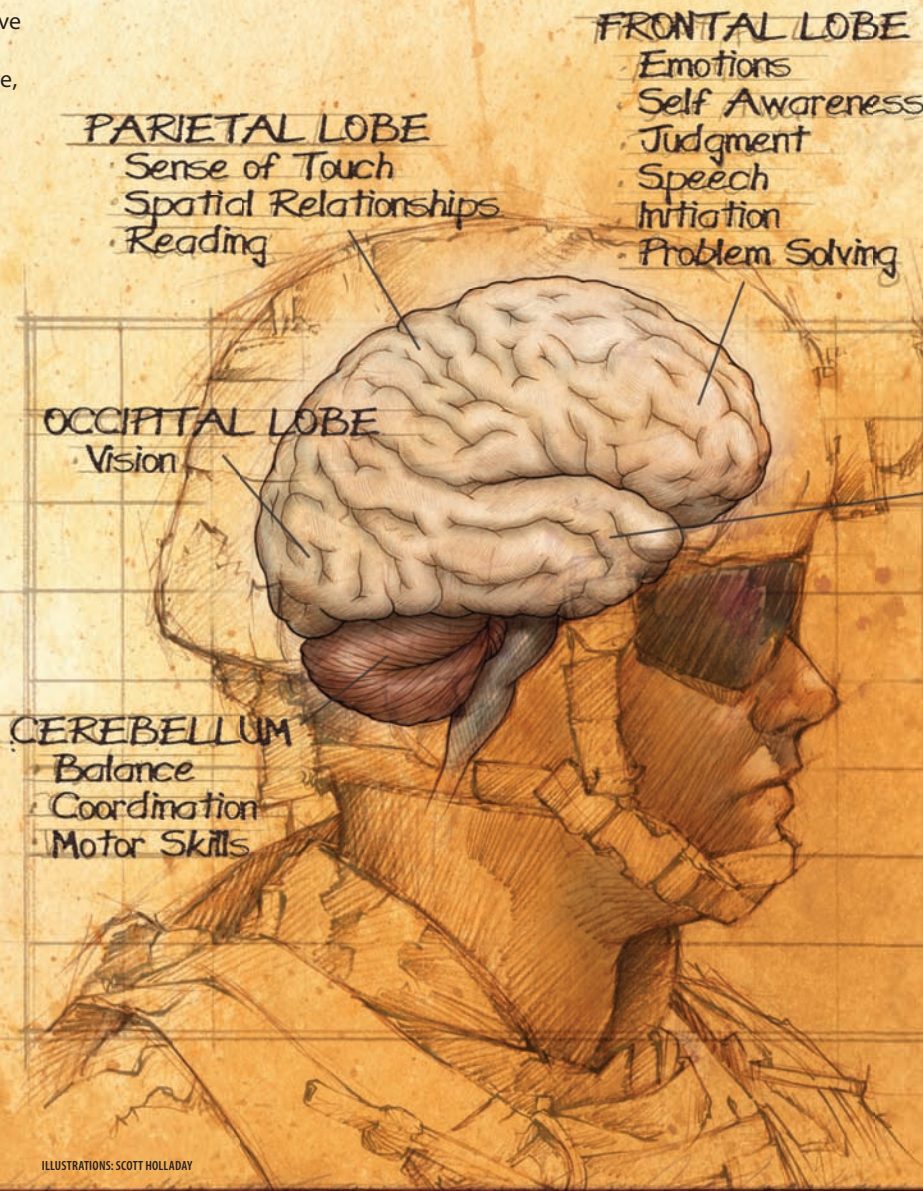
**Increased sensitivity** to light, sounds, distractions

**Blurred vision**

**Loss of sense** of smell, taste

**ringing** in the ears

Source: National Center for Injury Prevention and Control



ILLUSTRATIONS: SCOTT HOLLADAY

### 2000 B.C.

Trepanation, the practice of drilling holes in a person's skull to relieve a variety of "head" problems, is common in

various cultures.

### 450 B.C.

The Greek physician Alcmaeon is the first to use anatomic dissection of animals as a basis for his theories. He concludes that the brain, not the heart, is the central organ of sensation and thought.

### 1500s

Doctors and scientists perform autopsies on corpses to learn more about the brain and other organs.



### 1649

French philosopher and mathematician René Descartes proposes the idea that the brain works like a machine.

### Late 1600s – early 1700s

Scientists use microscopes along with various dyes to enhance their studies of autopsied brains. They learn that some parts of the brain have greater cell density than others, and that not all brain cells are identically shaped.







## How TBI occurs

**The brain is soft and floats in fluid inside the skull.**

When the head receives a severe blow, both the area of initial impact and the opposite side of the brain are injured. This effect is known as a coup/contrecoup injury and can cause bleeding and swelling within the brain with no way to release the pressure.

Advanced body armor and helmets used in combat zones are often blamed for confining the impact of an explosion inside the soldier's gear, occasionally leaving no visible appearance of TBI, which is detected later.

## TEMPORAL LOBE

- Memory
- Hearing
- Language
- Information
- Processing

## Experimental helmets go to war

The Army is outfitting more than 1,100 soldiers of the 101st Airborne Division deploying to Afghanistan with special helmets that collect data on how bomb blasts impact the brain. "It's basically a computer chip in a helmet," Gen. Mark Brown told *USA Today*.

The Army plans to use the data to help design safer helmets.



### 1848

Railroad construction worker Phineas P. Gage survives a serious traumatic brain injury. His experience becomes a classic textbook case in

neurology, proving that specific portions of the brain are responsible for distinct functions.

### 1960s

Despite increased knowledge of the brain, diagnostic and treatment methods lag behind; 90 percent of people who sustain traumatic brain injuries die.

### 1970s

Modern radiological technologies based on the same concepts used in X-rays allow doctors to better diagnose their patients' injuries. TBI fatality rates begin to decline.

### 1990s

President George Bush declares the 1990s the "Decade of the Brain." Substantial research in neuroscience results in a vast increase in understanding the brain's functions.

### 2000s

Advances in treatment and rehabilitation accelerate as national attention is given to U.S. troops suffering combat TBI.

Timeline source: "Head and Brain Injuries," Elaine Landau (Enslow Publishers, 2002), [www.pbs.org](http://www.pbs.org). Timeline photos: Northwind Picture Archives, AP





## MUSIC OF THE MIND

*Minnesota research center translates brain actions into a musical language.*

SIGNATURE  
WOUND  
OF THE  
WAR

Roger Dumas' office in the Brain Sciences Center at the Minneapolis VA Medical Center looks more like a recording studio than a research laboratory. There's a reason. In the 1970s, Dumas was a software writer for ARP Instruments, Inc., and Moog Music, Inc., both synthesizer manufacturers. He later worked in recording studios with such stars as Prince and John Lennon. He displays gold and platinum records for his work with Janet Jackson and Lipps, Inc., which performed the hit "Funkytown."

Nowadays, Dumas' mind is more on synapses than synthesizers. He works in the Brain Science Center's Studio of the Mind, where he is a research fellow and conducts symphonies of neurons, attaching musical notes to brain activities.

Dumas puts his work this way: "The analogy would almost be an orchestral seating arrangement for a given task. What parts of the brain are involved, and what is their relation to each other? Understanding that will help us ostensibly to determine the healthy functioning of the brain, whether it's not functional, and how to map it. For this particular study, music is the template. The instruments have characteristics that allow them to be compared to brain activations. Another

## THE BRAIN CHAIR

Dan Ludwig served as The American Legion's national commander in 1995 and 1996, a proud achievement for a devoted Legionnaire. But an effort he guided eight years earlier, he believes, is a greater legacy to his fellow veterans: a vigorous year-long fund drive in his home state of Minnesota that generated more than \$1 million to establish The American Legion Family-University of Minnesota Brain Sciences Chair at the Minneapolis VA Medical Center.

The chair was the brainchild of Richard Magraw, Robert Petzel and Tom Mullon, who at the time were on staff at the Minneapolis VA. Magraw was director of psychiatry at the facility and knew that the Legion already had a partnership there, having launched The American Legion Heart Research Foundation Chair at the University of Minnesota.

"We were having trouble recruiting," Magraw recalls. "We were having trouble maintaining prestige. We knew The American Legion had already taken the lead in developing a professorship in cardiology at Minnesota. We were looking to get The American Legion to support the establishment of a brain-sciences chair – brain sciences rather than psychiatry because brain sciences were the hot thing coming down the pike."

Their proposal: \$1 million in Legion donations, and the university would match it. "We, from the management standpoint of the hospital, were enthralled with the idea but not exactly knowing how to get it all going," said Mullon, past Minneapolis VA Medical Center director. "The people who got it moving are in the Legion, and I give them credit for knowing the right people and getting it done."

Brad Jorgens, Minnesota's department commander at the time, appointed an ad-hoc committee to examine the proposition. Ludwig

er study we are doing is the sonification of MEG (magneto-encephalography) data, data turned into sound. In our case, we've had people tell us it sounds very much like music. Music is multidimensional: it has loudness, scale, presence, panorama. Many parameters can be assigned to the data."



## *How a state Legion fundraiser advanced the field of neuroscience.*

was named to serve on it. “We were very nervous, obviously, to undertake a million-dollar fundraiser because it was a lot of darn money,” Ludwig said. “It still is, to come out of one department.”

The department’s executive committee signed off on the plan in the fall of 1986. An agreement with the university was signed, and a nonprofit corporation was formed. From January to June of 1987, Ludwig and the committee met frequently and often worked from 6 p.m. until midnight.

“First off, we needed to figure out how we were going to spread the word to the members,” Ludwig said. “Basically we had our plan in place in June of ’87, and that’s when we started formal fundraising. In the back half of ’87 and all of ’88 was the drive for the million dollars. In January of ’89 we hit the mark. The board expense for the entire fundraising period was \$25,000.”

Doctors traveled with Legion family members to present the plan across the state and to stress its importance. Efforts by individual American Legion posts kept the fundraisers from soliciting donations from corporations.

“The Richfield post pledged \$10,000 for every year the drive was in the active phase,” Ludwig said. “But at the statewide membership rally of ’89 in Rosetown, there was a blizzard going on, and the northern and western regions of the state were not there. It was a small crowd. After I gave my update and invited folks to come forth with checks – we needed about \$90,000 to hit the million – the Richfield commander came forward with another check for \$10,000, which put their total contribution at \$50,000. When we got done collecting and adding up the money, the (Richfield) commander was sitting right in front of me and said, ‘How short are you?’

I said, ‘\$20,000.’”

He walked up to the lectern, reached into his

pocket and pulled out a blank check. Right there he writes a check for 20,000 bucks, making their contribution \$30,000 that night and \$70,000 total and causing us to hit the million.”

The generosity of Minnesota Legion family members continued. “You would speculate that when you do a \$1 million fundraiser in a department ... your perennial programs could suffer,” Ludwig said. “The truth of the matter is in an 18-month period, we put \$1 million in the bank and every perennial program experienced new high levels of financial support. Jake Comer was national commander and had a \$1 million fundraiser going on the national level for the Child Welfare Foundation. Minnesota was second only to his own state of Massachusetts in contributing to that. That, to me, was really exciting.”

The Minnesota Legion family still plays an active role with the brain chair. A committee of three Legionnaires, three Auxiliary members and two members of Sons of The American Legion oversees and disperses the funds. The department also sponsors a lecture series at the center and annually awards two scholarships to University of Minnesota neuroscience students.

“I’ve worked here for 37 years now, and there is nothing I’ve been acquainted with, in terms of service organizations, that has had the kind of impact that this brain sciences chair has had,” said Petzel, the hospital’s chief of staff at the time and now VA’s VISN 23 director. “It has generated, multiplied, and really produced a significant body of scientific information and knowledge and has had an impact on a large number of diseases that both the population of our patients and the public at large suffers from. Nobody else has done anything like this. No other service organization in the country has had a program that’s made this kind of impact on science and medicine.”

– Steve Brooks

Dumas shares an audio file taken from the brain activity of a man who had just heard “The Pink Panther” theme song. The file shows that the brain almost perfectly mimicked the tune, a finding Dumas hopes will help him create a new roadmap of the most complex human organ.

“It will allow us to educate ourselves, and people

who are interested, on the workings of the brain from a whole new perspective,” he says. “Down the road, we may be able to determine synchronicity between areas of the brain. We may be able to recognize patterns that are inherent in inner-healthy or diseased brains. It allows for the sort of intuition that one can’t get through one’s eyes.

It happens in real time. This is another advantage of sound. It has a time element to it that even a movie can't have."

Dumas' research is just one realm the center has explored since opening in 1991, thanks to funds raised by The American Legion Department of Minnesota. The center focuses on explaining brain mechanisms and integrated functions, such as control of movement, motor learning and memory, spatial cognition and language function, and how they are affected by stroke, Parkinson's disease, Alzheimer's disease, schizophrenia, bipolar disorder, mental retardation and neuro-prosthetics.

When the center first opened, it did so with a staff of three. Now there are 50, led by Dr. Apostolos Georgopoulos, The American Legion Family-University of Minnesota Brain Sciences Chair. He is also the University of Minnesota regents professor, the university's McKnight Presidential Chair in Cognitive Neuroscience, and professor of neuroscience, neurology and psychiatry.

The soft-spoken, Patras, Greece-born scientist, who came to the facility from Johns Hopkins in 1991, takes great pride both in the center's accomplishments and its potential to unlock some of the brain's many secrets.

"What has kept us from understanding the brain is, it's very heterogeneous, and it's very plastic. You cannot pin it down. You try to fix one condition, and another changes. It's a continuous integration and spread of information. One of the reasons we don't understand the brain that much is because of its nature. We don't have the conception framework to understand that. It's disappointing on one hand, but it's very exciting because we have so much to learn."

The Brain Sciences Center is equipped with an MEG neuro-imaging tool, which allows nearly real-time measuring of brain activity, and a staff that comes from a wide range of disciplines. That combination allows the center to target numerous areas of research, including:

■ **PTSD.** This new study, using MEG, will involve veterans of all ages, ranging from World War II to the war on terror, who suffer from Post-Traumatic Stress Disorder.

■ **Adolescent psychiatric diagnosis.** The project's goal is to enhance treatment of teens with schizophrenia or bipolar disorder.

■ **Alcoholism.** Images are collected of severe cases during early withdrawal to measure the impact of alcohol in the brains of alcoholics.

■ **Alzheimer's disease.** Researchers hope to detect the earliest changes in the brain functions

of Alzheimer's patients and provide background for future studies on treatment.

■ **Schizophrenia.** The MEG study focuses on processing information by schizophrenia patients at different perceptual, conceptual and attentive levels.

One of just a handful of instruments like it in the United States, the MEG measures actual dynamic brain activity at a thousandth-of-a-second temporal resolution. The MEG is non-invasive. A patient lies down on a "bed" in a magnetically shielded room, places his or her head inside a helmet-shaped opening, and stares at a white light for 45 to 60 seconds. The device's 248 sensors record interactions in the brain on a millisecond-by-millisecond basis, much faster than an MRI.

"It allows us to see brain activity on the same time scale as the brain operates," said Dr. Art Leuthold, the center's MEG site manager. "Before, you could see the whole brain activity, but the time scale was more like a second (delay)."

The center initially tested the device on 10 healthy volunteers and found their brain cells were moving at nearly identical paces and patterns. That led to a larger study involving 142 subjects, including people with Alzheimer's disease, chronic alcoholism, schizophrenia, multiple sclerosis or Sjogren's syndrome, as well as healthy controls.

Researchers at the center also develop large-scale mathematical models of the brain network and then simulate those models using high-performance supercomputers. The large-scale neural network simulations are able to model certain aspects of the underlying brain structure, and the information gathered should provide means for the investigation of many neurological disorders.

The center's researchers also hope the information can help develop a new generation of prosthetics, driven by brain signals, to assist patients dealing with paralysis or limb loss. The simulations of large-scale brain models can be important for pinpointing relevant brain signals and their movements. The end result: a prosthetic limb designed so its movement is driven by brain signals – something Georgopoulos says can greatly help U.S. servicemembers who have lost limbs. Such an application for his research, he says, is merely a beginning.

"You open up so many other possibilities there, not just the motor stuff. The neurotherapy, the remediation, retraining people to use limbs ... There's so much we could do."

– Steve Brooks



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# MINDS OVER MOTION

*VA-connected research proves that thoughts alone can control computers.*

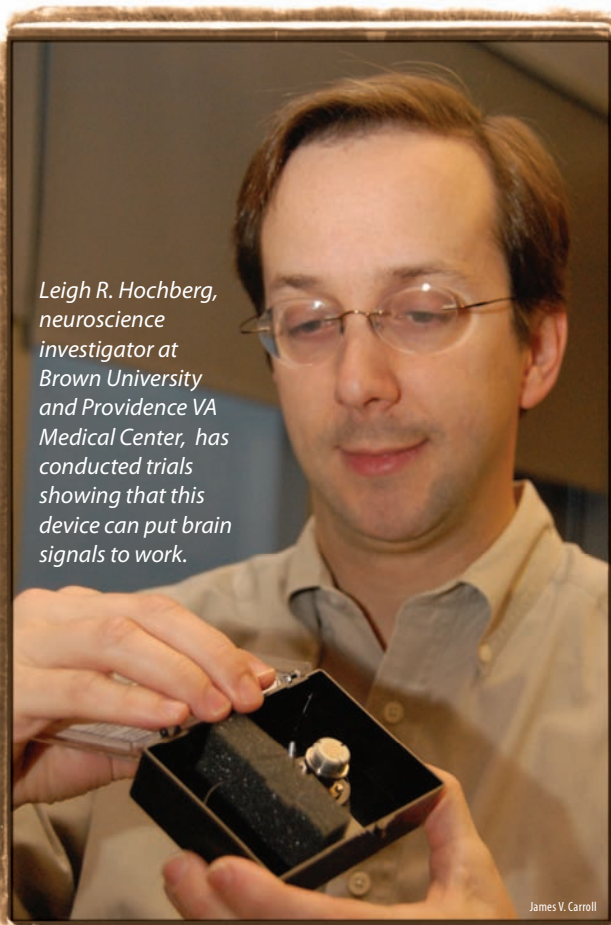
SIGNATURE  
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Imagine you're paralyzed. A catastrophic accident or disease has trapped you inside a body that refuses to follow your brain's instructions. Your brain, meanwhile, functions normally, although you are unable to move your limbs or speak. You cannot pet your dog, hug your child or wave to the paperboy. You cannot articulate even the simplest request, desire or feeling. I'm hungry. My nose itches. I'm cold. The television is too loud. I love you.

Now, imagine you could manipulate objects around you – open e-mail, play a video game, adjust the volume on the television set, even lift a cup of coffee to your lips or propel your paralyzed body across the room – using only your thoughts. That's more difficult to imagine, isn't it?

Scientists at Brown University in Providence, R.I., are operating beyond most imaginations. They have developed data that show how a tiny sensor can allow a quadriplegic human to control a robotic limb, open a prosthetic hand and move a computer cursor using brain activity alone. The device that makes these actions possible is called BrainGate, created and tested by Cyberkinetics Neurotechnology Systems. It is capable of recording multiple brain cells simultaneously, decoding signals in real time to control computers or other external devices.

The research behind BrainGate is largely credited to neuroscientist John Donoghue, director of the Brown University Brain Science Program. Donoghue, his colleagues and students were interested in how the brain constructs movement. They knew that individual brain cells communicating to each other produce signals that result in movement. To understand how that happens, they needed a way to record multiple brain cells simultaneously. By



*Leigh R. Hochberg, neuroscience investigator at Brown University and Providence VA Medical Center, has conducted trials showing that this device can put brain signals to work.*

using a sensor planted in the brain of a primate, the team decoded signals and demonstrated that the monkey could move a computer cursor merely by thinking about it.

"We taught a monkey to control a cursor on the screen with his hand just as you would control the arrow on a desktop with a mouse," Donoghue says. "We used sensors to pick up brain signals as the monkey moved the cursor. We then ran the data through a computer, bypassing the monkey's hand movement to see if the brain signals – not the hand – could move the cursor. And it worked."

What about paralyzed humans? "We wanted to

## TBI Under the Microscope

### PHILADELPHIA VA MEDICAL CENTER

Dr. Alan Tessler is conducting lab experiments in animal models of TBI to assess the performance of various treatments.

### WEST HAVEN, CONN., VA MEDICAL CENTER

Drs. Stephen Waxman and Jeffery Kocsis are conducting research focused on regenerating nerve cells in spinal cord and stroke victims that may have practical applications for veterans who have TBI.

### HINES VA MEDICAL CENTER, CHICAGO

Dr. Theresa Pape is looking at how two treatments – a drug and magnetic stimulation – affect brain plasticity and recovery.

### TAMPA VA POLYTRAUMA CENTER

Dr. Michael Clark is conducting a study of pain and emotional disorders among veterans with polytrauma, many of whom have TBI.



know what happens when there is a disconnection of the brain from the body,” Donoghue says. “So a number of colleagues and I started a company that could forge a way to take our laboratory device and turn it into something beneficial to humans.”

Four human subjects have participated in two trials using the device: two with spinal-cord injuries, one who suffered a brain-stem stroke and another with ALS, a degenerative disease that impairs motor movement. Initial human trials concluded that the implanted device is safe, movement-controlling brain activity is present, and indeed, people can perform useful tasks by their thoughts alone.

“It was really striking to me that the brain activity was still there,” Donoghue says. “In fact, it was even more surprising that the mere suggestion to subjects to imagine moving their arms right or left immediately triggered brain-cell activity.”

While encouraging, the early results were less than perfect. The quality of control from raw brain signals was not very good. Initial movements were wobbly, and the cursor did not stay still.

“When you and I move our hands we’re using millions of neurons,” Donoghue says. “In the trials, we were trying to replicate movement by using input from only a few dozen cells. We learned right away that short-term practice didn’t improve quality, and while I believed long-term practice might improve results, I had little data to prove that.”

To improve quality of movement, Brown University’s Dr. Michael Black took the raw signals and applied additional computations. Donoghue and his team then added the capability to click on an icon on a computer screen, giving the person the ability to make a selection using an on-screen keyboard, to control a television, and to operate other external devices.

**Cursors to Muscles.** Neurotechnology is not limited to helping motor-impaired humans move cursors on computer screens or to manipulate

remote appliances by thoughts alone. Cutting-edge biomedicine, neuroscience, mathematics, computer science and engineering have paved the way for the development of closed-loop neuromotor prostheses that may enable interaction between the brain, paralyzed limbs and external devices, such as robotic limbs. Simply put, scientists are confident that neural activity transmitted by tiny devices implanted in the brain could soon command motion over paralyzed muscles or the actions of prosthetic limbs or electric wheelchairs.

“Our long-term goal is to restore lost function as naturally as possible,” says physician Leigh Hochberg, a Brown University alumnus and lead author of a 2006 article in the science journal *Nature*, detailing clinical trials involving the BrainGate device. “If someone with advanced ALS or brain-stem stroke is unable to speak, we’d like to restore the ability to communicate through external devices. For someone with a spinal-cord injury or lost limb, we’d like to restore the ability to control one’s own limb or prosthetic limb as naturally as people without injury or disease do.”

There are several potential ways to restore lost function, Hochberg says. The simplest may be to try to reconnect the two parts of the system that are still working across the part that is injured. For example, the brain still works, and the limb still works, but the connection between them – the spinal cord – is broken. By connecting the signal in the brain that says “move my limb” to a prosthetic device, or by using functional electric stimulation, it may be possible one day to move the prosthetic limb or natural limb by simply thinking about it.

More than 15 years of research and development have yielded astonishing results at the Cleveland Functional Electrical Stimulation Center, a consortium whose partners include the Cleveland VA Medical Center, Case Western Reserve University and the public hospital system of MetroHealth Medical Center. FES trials have shown that people

#### **VA BRAIN REHABILITATION RESEARCH CENTER, GAINESVILLE, FLA.**

Leslie Gonzalez-Rothi and staff are working on language and other rehabilitation treatments for stroke victims and veterans who have TBI.

#### **PALO ALTO, CALIF., VA MEDICAL CENTER**

Dr. Henry Lew is studying how a driving simulator might enhance cognitive recovery after brain injury.

#### **PHOENIX VA MEDICAL CENTER**

Registered Nurse Dana Epstein is researching ways to modify insomnia treatments for veterans with TBI.

#### **DEFENSE AND VETERANS BRAIN INJURY CENTERS**

VA and DoD collaborate on research projects across the country. DVVICs have clinical care and research programs at three military sites, four VA facilities and one civilian partner program.

with spinal-cord injuries can regain some mobility when electrodes are placed in the muscles or nerves of an immobile limb and stimulated by another uninjured muscle group. Subjects with strategically placed electrodes have been able to perform tasks such as lifting cups of liquid to their mouths. But the technology has its limits.

“A limitation of FES is that the available controllers – the signals that tell the device how to move a limb – are limited to activities that are still possible, such as moving a shoulder or turning the head,” Hochberg says.

“Ideally, the signal that drives a limb would be the same signal that is coming out of the brain that caused movement in the limb in the first place.”

The BrainGate device also has limitations; size and connectivity are two. The device consists of a recording array of electrodes about the size of a baby aspirin. It is surgically implanted in the motor cortex of the brain. The electrodes transmit brain activity along fine wires to a small pedestal attached externally to the top of the skull. A large plug is attached to the connector, and the signal is transmitted to a computer. The implanted device must be physically tethered to an external computer. “Much like brain stimulators for Parkinson’s disease or a heart pacemaker, the BrainGate device is eventually going to have to become fully implanted,” Hochberg says. “Arto Nurmikko and colleagues here at Brown University are developing methods to fully implant the device so brain activity can be transmitted wirelessly to a receiver. Brain signals could also be run under the skin to drive a limb. The key is to change brain signals into control signals, and that requires an external computer or implanted chip.”

Amazing as BrainGate may be, Hochberg acknowledges the infancy of its technology. “We know a lot less than we want to know, but what we do know is that it’s indeed possible to effect movement through thought alone,” Hochberg says. “This is exciting and important science. Development and application of this technology will, I believe, enable disabled people to control the environment around them, and in the future move prosthetic or robotic limbs and even their own paralyzed limbs – through brain signals.”



*The BrainGate sensor is about one-quarter the size of a fingernail.*

James V. Carroll

**Mixing and Matching.** The Center for Restorative Regenerative Medicine is also playing a pivotal role in improving function for individuals with limb trauma by developing high-tech solutions for the restoration of limbs. The center, directed

by Dr. Roy K. Aaron, is a collaboration between the Providence VA Medical Center and Brown University. Aaron says he would like to eventually see prosthetics activated by a junction of some sort between the body of the user and the prosthetic device. The signals might travel the nervous system, the muscles or come directly from the brain and perform subtle motion, even have artificial skin with touch pads that can actually feel. Ten years ago, such ideas might have seemed like science fiction, but VA and university researchers

at Providence, Cleveland, Chicago and other centers give Aaron confidence that his dream is obtainable.

“Our challenge here is to use what progress we achieve and what progress people deliver to us,” Aaron says. “There is a healthy creative tension in orthopedic research between biologists and engineers. Sometimes the biologists get ahead of the engineers, and sometimes the engineers get ahead of the biologists. The job of the clinician is to choose for a patient those solutions that are most appropriate.”

The Providence center is working on a number of prosthetic technologies intended to provide independence to users of the devices. Research there is breaking new ground in tissue engineering, orthopedics, neurotechnology, prosthetic design and rehabilitation. The various techniques converge to create the concept of a bio-hybrid limb – composed of both biological and non-biological materials – enabling researchers to transcend the limitations of biological tissue and prosthetic materials alone.

For those who have lost the use of limbs – due to spinal-cord injury, brain-stem stroke, ALS, amputation or other reasons – the BrainGate device and other state-of-the-art prosthetic technologies are more than scientific breakthroughs. They represent hope that someday, somehow, science will find a way to restore movement – and the freedom that comes with it – to those affected.

“It’s my hope that day comes sooner than later,” Aaron says.

– James V. Carroll





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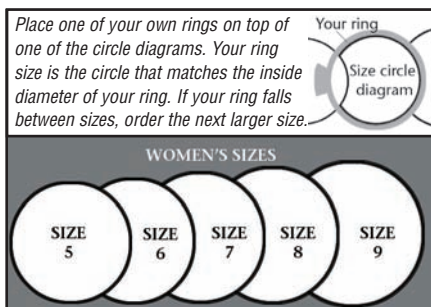
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# THE SOCIETY INSIDE OUR SKULLS

*The following is adapted from a 2006 commencement address given by Dr. Apostolos Georgopoulos, director of the Brain Sciences Center at the Minneapolis VA Medical Center.*

SIGNATURE  
WOUND  
OF THE  
WAR

Your brain does all of your thinking, feeling, acting, speaking, dreaming – everything you can imagine, even imagining itself. And all social interplay boils down to interacting brains: mother and child, sports games, teacher and students. How is that accomplished? The answer lies in the immense but orderly complexity of this most precious organ. There are about 100 billion neural cells in the brain interacting with each other. If you attempt to compute the number of their possible interactions, you get numbers exceeding the number of the atoms in the universe. The secret, though, is not in the complexity itself but in the order within it. In fact, this is true for any large system.

Being an organ of the body, the brain shares all principles of homeostasis governing all other organs and is subject to all vicissitudes of the rest of the body. However, what is unique about the brain is the fact that its constituent elements, the neural cells or neurons, interact extensively with one another. This is unlike any other organ of the body and resembles more the interactions among people in a society than stars in the universe. Like society, not every cell communicates with every other cell; groups of cells doing similar jobs are close together and interact more frequently and more intensely among themselves than with other, farther-away cells. Repeated interactions tend to “stick” – so to speak – such that they tend to repeat themselves – a mechanism that underlies learning and memory. Smaller ensembles of cells, in the order of thousands, work as units for specific tasks, such as moving, perceiving, thinking and feeling. It seems, therefore, that in a small volume of brain tissue, in each one of us, a whole society of neurons lives and thrives.

How can we express brain function? Can we write a series of equations to account for it? Let me paraphrase these questions. How can we express societal function? Can we write a series of equations to account for it? Not as simple as it looks. The problem and the challenge lie in the nature

and extent of interactions. Unlike the universe where the interactions among heavenly bodies can be reduced to gravity, heat, etc., the interactions among brain cells (and people) are very specialized, particular, variable, and, most important of all, they change over time. Literally, bonds are developed between frequently interacting neurons (and people), and these altered interactions further affect the development of new interactions. In a

way, you can write eternal equations for the universe, but you can only write ephemeral equations for the brain (and society).

One of these equations has to do with how cells work together. We found 24 years ago that populations of neurons have a democratic system of governance, where each neuron votes, so to speak, in its own preference (candidate), and the vote is tallied leading to a specific choice. We can literally

write this equation down, and even use the result for various purposes. We first reported this idea and its mathematical implementation in 1982. Now it has begun to be used for controlling prosthetic devices, such as artificial limbs. For that purpose, the activity of cells in the motor area of the cerebral cortex is recorded, and the preference of a given cell for a certain direction of movement determined. Then, the activity of a number of cells is recorded on line, their preference is weighted as a vote, the votes are counted, and, lo and behold, the result points in the direction of the upcoming movement, tens of milliseconds ahead of the actual movement. In fact, it has been found that this is a fairly general operational principle for neuronal populations, and one that works in many diverse cases and brain areas, from predicting the direction of arm movement to face recognition.

All you have learned has been information you have gained by reducing your uncertainty (I could say “ignorance”) about the topics you have been taught. And all of what you will achieve will be gaining new information. Now, the beauty of the brain is that it is a smart machine for gaining information. It does not necessarily rely, like a computer, on some exhaustive analysis, but it can jump, so to speak, following a hunch, a clue or an insight, to a satisfactory solution. Big reduction in uncertainty, and big gains in information, can be achieved in a few steps, and in a short time. 🍀







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**REMEMBER**—Call **1-800-542-5547** for information about the above plans.

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*Republic of Korea veterans who fought communism during the Vietnam War are proud to share their legacy with new generations of Koreans.*

# A TRADITION OF HONOR

BY U.S. ARMY COL. BRYAN GROVES

**During the Vietnam War**, more than 325,000 men and women from the Republic of Korea, most of them volunteers, served at the request of the Republic of Vietnam and in support of the U.S. government's efforts to stop the spread of communism. Nearly 5,000 were killed, and more than 10,000 returned home wounded. Today, a proud veterans community recalls the time it spent in the Capital "Tiger" and 9th "White Horse" infantry divisions, the 100th Logistics Command, the 2nd Marine "Blue Dragon" Regiment, or the "Dove Unit," protecting Vietnamese villagers from Viet Cong terror, delivering humanitarian aid and helping with reconstruction. That same set of goals serves as a guide to ROK soldiers serving in Iraq. Members of the Vietnam Veterans of Korea and the Korean Veterans Association played a key role in their government's decision to send thousands of ROK soldiers to Iraq. These same veterans form the core of a proud, patriotic South Korea that is pro-American and seeks to deter a despotic North Korea as it strives to maintain peace in the region. 🌿

*U.S. Army Col. Bryan Groves is stationed in Seoul, South Korea. He is a member of American Legion Post 219 in Malone, N.Y.*

**Ji, Seong Jo** deployed to Vietnam in November 1968 and served there 14 months. The 26-year-old sergeant was older than his platoon leader, but in his family's opinion was still too young for war. They anxiously prayed for his safety throughout his combat tour.

A soldier in the ROK's 9th "White Horse" Division, Ji took part in 13 operations while in Vietnam and participated in almost nightly ambush patrols to protect villagers from the Viet Cong.

The division got its name during the Korean War, when it fought off ferocious attacks by more than 20,000 enemy troops at the Battle of White Horse Mountain. Ji joined the division in Vietnam just as it was wrapping up a two-month operation in which it destroyed hundreds of regular troops from the North Vietnamese Army.

Six of Ji's closest comrades in the White Horse Division



were killed. Another close friend of his was wounded and medically evacuated, along with Ji's platoon leader and platoon sergeant.

Ji remembers fondly the U.S. air crews and frequent airmobile operations. "I always felt safe in their helicopters, and I felt like allies with them," he says. "I regard the U.S. as a friend."

Ji received a Regimental Commander's Citation for his service in Vietnam and is a member of Vietnam Veterans of Korea, the primary organization in South Korea for those who served in southeastern Asia.





**Hwang, Sun Kun** served 13 months in the Vietnam War in 1972 and 1973. Like many of his countrymen, Hwang volunteered “because we (ROK soldiers) needed to have combat experience to be ready to fight and win against the communist military of North Korea during the Cold War.”

As a 24-year-old lieutenant in the Vietnam War, Hwang commanded the 1st Platoon, 6th Company, 2nd Battalion, 1st Brigade of the Capital Division. He spent most of his time as part of a company-sized quick-reaction force, leading numerous missions, mostly on foot through the jungle. He remembers, with great appreciation, the U.S. fire support he received from UH1 helicopter gunships and artillery units.

Hwang also recalls the civilians he met during patrols, and their invitations to meals hosted by village leaders. They wanted protection from Viet Cong guerrillas and welcomed those who could provide it. Many ROK

soldiers and Vietnamese locals had another connection, too: their Buddhist religion.

Direct contact with U.S. troops was rare, but for three months Hwang’s platoon manned a combat outpost atop a rugged mountain, where U.S. helicopters resupplied it almost daily. American pilots and crews were friendly and helpful, on one occasion providing a night medical evacuation for an ROK soldier.

Hwang and his fellow Korean veterans of the Vietnam War say they are extremely proud of their service. “During that time, the Republic of Korea was a very poor country,” he says. “We know that our service in Vietnam helped build Korea’s economy and helped make it a rich country.”

In fact, the United States gave the ROK extensive foreign aid and awarded many Korean firms service and manufacturing contracts related to the war, triggering foreign investment and dramatic improvements in living standards for all South Koreans.

**Baek, Yong Gu** was 23 when he left two brothers and his parents to deploy to Vietnam in June 1970 as a sergeant with the Tiger Division. His 11th Company saw a great deal of action during the 14 months he was in theater, a tour that included four different platoon leaders. Two were killed, another lost a leg, and a fourth survived to bear the memories of 34 comrades who gave their lives. Nearly as many men were wounded in the fighting.

Baek’s unit supported civic-action programs designed to separate the Vietnamese civilians from guerrilla combatants. When they weren’t searching for Viet Cong and enemy troops, Tiger Division soldiers worked with the ROK’s “Dove Unit” engineer group to help build roads, clinics and houses. They also provided medical care to local villagers, and shared rice and C-rations with them.

During large operations involving U.S. air support, artillery and naval gunfire, Baek met with U.S. observers and radio operators, and his company regularly flew into combat in U.S. Army helicopters. He remembers one GI who operated counter-mortar radar and talked about studying art in New York after the war.

A member of Vietnam Veterans of Korea, Baek received two military decorations and an ROK presidential unit citation for his service during the war. He currently receives treatment twice a month for Agent Orange exposure, at an ROK Ministry of Patriots and Veterans Affairs hospital.



**Kim, Yang Kon** also volunteered to serve in Vietnam. He went in March 1970 as a 23-year-old first lieutenant, and left in May 1972 as a captain. "At that time, to fight against the communists was high in the personal value system of many young Korean men," Kim says.

From 1962 to 1974, Kim served in the ROK's Taekwondo Group in Saigon, an elite unit of 247 men. For those 12 years, they taught more than 200,000 Republic of Vietnam soldiers and children the martial art of Taekwondo. As personal trainer for more than 500 soldiers and schoolchildren, Kim had more contact with the Vietnamese than most ROK volunteers. He also spent four months studying the language



in a Vietnamese Army classroom, followed by another seven months of nightly lessons.

Kim taught Taekwondo to U.S. Marines from the embassy detachment and soldiers from the Military Assistance Command Vietnam. They became more than allies, he says – they were friends. Kim says he learned many things from the Americans, including justice. "They were very straight and

followed all the rules," he recalls. "They also taught me about fellowship."

Since the war's end, Kim has traveled to Vietnam four times to visit many of his former students, who became the core of the Vietnamese Taekwondo Federation.

Kim says he believes the ROK Taekwondo Group played a part in alleviating mistrust between the Republic of Korea and Vietnam during the war. "We gave something to them we cannot take back, and they appreciated that," he says.

In Iraq, a new generation of ROK soldiers of the Zaytun Division continues the tradition by teaching Taekwondo to Iraqi schoolchildren as part of their pacification program.



**Retired Lt. Gen. Chae, Myung Shin** commanded ROK forces in Vietnam from October 1965 to July 1969. A Korean War veteran, he currently is an adviser to the ROK Ministry of Patriots and Veterans Affairs.

He did not choose, at first, to be a soldier. Soldiering chose him, he says. As an elementary-school teacher in Nampo, now in communist North Korea, Chae aspired as a young man to become a gospel minister. Chae witnessed the Soviet occupation of present-day North Korea in August 1945, and watched the communist puppet masters install Kim Il Sung as supreme ruler.

Chae openly admits that communist propaganda at the time, with its promise to share all wealth equally, initially appealed to him. However, as he witnessed the persecution and murder of his fellow Christians, Chae decided to head south. He joined the Republic of Korea Army and helped fight communist guerrillas in Jeju Island and the ROK's Taebaek Mountains from 1947 to 1950.

After the communists invaded the Republic of Korea on June 25, 1950, Chae was promoted to lieutenant

colonel and posted to the "skeleton corps," a special-operations unit that worked behind enemy lines. His experiences fighting guerrillas – and fighting as a guerrilla – made him a natural choice to lead the ROK contingent in Vietnam.

Chae knew Vietnam would be a tough fight for his soldiers. The Vietnamese communists had been at war for more than 20 years – first against the Japanese, then the French. Ho Chi Minh, the Vietnamese communist leader, was widely praised in South Vietnam for his struggle for independence against colonial powers.

Chae knew that Gen. Vo Nguyen Giap, who commanded North Vietnamese forces, had studied under Mao Zedong. So Chae also studied Mao, and developed strategy and tactics to separate the communist guerrilla "fish" from the Vietnamese villager "sea." From Chae's perspective, the approach depended on making the Vietnamese feel safe from communist intimidation and violence, and providing them with food, access to health care and improved physical infrastructure.

He issued a simple code of conduct to his soldiers in Vietnam:

1. To the enemy, be courageous and fearless.
2. To the Vietnamese people, behave with kindness and warmth.
3. To our allies, show them we are well-disciplined and reliable.

Chae's code reflects how Korea's Vietnam War veterans want to be remembered: courageous in a fight, careful with the lives of non-combatants, and dependable allies in time of need.



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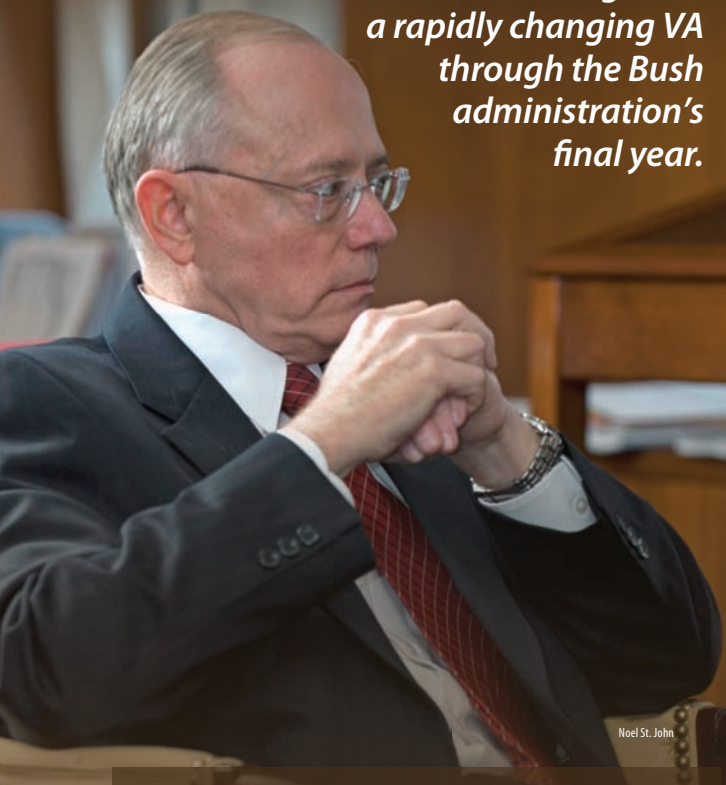
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# A Critical Moment

*Combat veteran guides a rapidly changing VA through the Bush administration's final year.*



**Lt. Gen. (ret.) James B. Peake, M.D.**

- > Served with the 101st Airborne Division in the Vietnam War after graduating from the U.S. Military Academy at West Point in 1966
- > Was wounded twice in the war and received numerous medals and citations
- > Graduated from medical school at Cornell University
- > Graduated from the Army War College
- > Spent nearly 39 years in the Army, leading and practicing medicine at several military hospitals
- > Served as commanding general of the U.S. Army Medical Department Center and School, the largest medical training program in the world
- > Served four years as the U.S. Army's surgeon general
- > Served as executive vice president of Project Hope, a nonprofit organization that provides health care in 30 different countries
- > Worked as chief medical director and chief operating officer for QTC Management, Inc., which provides medical examinations for the U.S. government

**THERE'S A HINT OF MISSOURI** in the modest, plainspoken voice of James B. Peake, a 63-year-old St. Louis native who grew up the son of an Army nurse mom and an Army officer dad. It's a voice that belies the remarkable collection of military, medical and business titles he has attained. Cadet. Second lieutenant. Doctor. Lieutenant general. Surgeon general. Executive vice president. Chief operating officer. Last December, he added one more to the list, when he was confirmed to become the sixth secretary of Veterans Affairs. He replaces Jim Nicholson, a fellow West Point grad, who resigned last October. Peake will fill the cabinet slot for the remainder of the Bush presidency.

On the day Peake was sworn into office, President Bush summarized the new secretary's challenge this way: "Dr. Peake takes office at a critical moment in the history of this department. Our nation is at war, and many new veterans are leaving the battlefield and entering the VA system. This system provides our veterans with the finest care, but sometimes the bureaucracy can be difficult."

Senate Veterans Affairs Committee member Patty Murray, D-Wash., often a critical voice about VA's leadership during the Bush administration, told *USA Today* after Peake's confirmation that she believed the secretary's "heart is in the right place, but this job will take more than promises. He needs to work every day to overcome the bureaucratic ineptitude, backlog of claims, wait times and other challenges our veterans face every day."

The first doctor and first general to serve as VA secretary, Peake knows he is on a short clock with a change in administration looming at year's end. He told *The American Legion Magazine* that despite the brevity of his span at VA, he hopes to guide many long-term improvements.

**Q:** *Why do you think the president called your time as VA secretary "a critical moment in history"?*

**A:** It's a critical era because we are a nation at war. For the first time in a long time, we have soldiers, sailors, airmen and Marines in harm's way, with multiple deployments. We've got a new generation of combat veterans coming back.

**Q:** *VA's health-care system seems to be evolving with this new generation. The polytrauma model that seems to have been tailored specifically for them, in which veterans receive medical care, mental health, occupational therapy, job placement, spiritual and family services under one roof at VA ...*

**A:** Another way to say that is it's veteran-centric.



**Q:** *Is that the general direction VA health care is heading?*

**A:** Where it's appropriate, I think that's exactly where *all* medicine is going. You read about family-centric care, patient-centric care ... for us it's veteran-centric care. Medicine is a team sport. You need all the modalities coming together to make sure the whole patient is taken care of. It's like putting mental health into our primary-care clinics. That's not just for OIF-OEF (Iraq and Afghanistan veterans). It enhances care for everybody.

**Q:** *Today's generation of combat veterans seems to have established its own unique set of health-care needs.*

**A:** It has. A lot of people don't recognize the huge shift in the medical paradigm for the military, in terms of rapid evacuation. A lot of people see it and get a sense of it from TV. It's a long ways from the convalescent hospitals we had when I was in Vietnam, where people sat for months in-country. Now, these young men and women find themselves back at Walter Reed within 48 or 72 hours after being injured.

**Q:** *And soon out of DoD and into the VA system. How do you see that collaboration evolving in years to come?*

**A:** I'm for blurring the line between the two systems. I think you should be able to get your acute care at Walter Reed, get your polytrauma rehab at one of our (VA) places, and move back on active duty and return to your unit. We don't want this artificial distinction.

**Q:** *What is happening to blur the line between DoD and VA on disability evaluations and ratings?*

**A:** We're just getting into it. The pilot program basically is that the Department of Defense will make a determination if the soldier, sailor, airman or Marine is fit or unfit for duty. VA will, in one process, do the physical examination – whatever the claim conditions are – and that information is provided back to DoD. Essentially, you have DoD making the decision. The rating is a single comprehensive rating. And then, the unfitting condition will determine whether it's a medical retirement or not a medical retirement.

**Q:** *And that disability rating would follow the person into the VA system?*

**A:** Sure. Then you're done. You're in the system. You get your check within 60 days.

**Q:** *The Dole-Shalala Commission recommended something of a revolution in terms of VA-DoD collaboration with federal recovery coordinators to help transitioning veterans.*

**A:** Dole-Shalala has given us a great blueprint. Details have to be worked out. We are already moving forward with the federal recovery coordinators. A lot of things have been done since Dole-Shalala started, already complementary to (VA) activities. Now, we've got to get them together. It's not VA doing it. It's not DoD doing it. It's us figuring a way to do it together, to marshal our forces so we are sharing ideas and knowledge.

**Q:** *What kind of oversight will VA have with the federal recovery coordinator program?*

**A:** We're not developing it for VA. VA happens to be the home. We have the responsibility for housing it. But we are doing it in tandem with DoD. We also have some consultation with public-health services. The idea is that you have someone who is watching over the long-term recovery plan that is made for these kids and realizing that's going to change over time as their needs change.

**Q:** *What do you think the 2009 VA budget recommendation will mean for the future of VA?*

**A:** Well, \$93.7 billion is a lot of money. We ought to be able to do some good stuff with it. We want to continue to expand our primary-care base where we can provide greater outreach and improve our access. As I look at what this budget can do, we will essentially be able to eliminate the 30-day waiting list by the end of 2009. We brought it down substantially just this last year. That's one thing. Mental health is something else we are all concerned about. We want to make sure we've got the right infrastructure out there. We have to hire people, too. This gives us money to do that.

**Q:** *Again this year, the administration has recommended the introduction of enrollment fees and higher co-payments for veterans, a proposal that has annually failed to get through Congress. How do you think this year's version will sell on the Hill?*

**A:** Really, it's a matter of equity. What is right? I'm a military retiree. I pay my annual enrollment fee to be a part of TRICARE. And I know a lot of retirees who feel that way, that it's right. It also encourages people to come in and not cherry-pick our services but actually get more comprehensive care because they will have invested in our system. I appreciate that some people don't like the idea of it. But I think it's a reasonable thing to ask.

**Q:** Does this year's proposal differ?

**A:** Same as last year. There's a graduated scale. You don't pay anything if you are below \$50,000 a year. You don't hit \$750 a year until you make \$100,000 a year.

**Q:** And that money would go back to VA care?

**A:** It actually goes to the Treasury. It doesn't affect our budget at all. It's not something that somebody is going to have to make up in our budget if we don't get it. It's neutral.

**Q:** Over the past eight years, VA has not complied with the long-term care standards – in terms of bed count across the system – laid out by the Millennium Health Care Act. Can you explain?

**A:** The whole nation is moving away from institutional care. What you really want is people functioning within a community, within their families. And so we've got about a 28-percent increase in our non-institutional care in 2009. I think that's the right way to go. We have 32,000 people with telemedicine in their homes. That's pretty powerful. I'm not sure any other system in the world has that. Where would you rather be, in a nursing home or in your own bed?

**Q:** Do you foresee greater use of outside-contracted services?

**A:** The issue is, where do we have the need? And then, let's figure the best way to provide those services in an equitable, fair and efficient way. If we need to contract, then we need to do that, and we are doing it around the country. Our focus ought to be to do the right thing.

**Q:** What about VA's medical-school affiliations?

**A:** I think that's one of our greatest strengths. I see those partnerships continuing.

**Q:** Some of these partnerships have influenced VA construction projects, which have not moved forward like veterans in many markets thought they would after the Capital Asset Realignment for Enhanced Services (CARES) plan was released in 2004.

**A:** No one can recapitalize a system as large as ours in one fell swoop. Our job is to plan and to do the best we can. CARES was 2004. We had 156 CBOCs (community-based outpatient clinics) on the CARES list. Twenty-four of those have since been judged we don't really need, plus there are others that weren't even envisioned when we did CARES. You know, in the Army, we used to say the plan never survives first contact with the enemy.

**Q:** Would it be valuable to do another study like CARES?

**A:** We have to be sure we have a model that's adjusted to the 21st century. Health care has changed. So much is done in the outpatient environment. Instead of thinking every place ought to have a monolithic hospital, maybe what we need is an ambulatory health center.

**Q:** How do you convince veterans of that?

**A:** I think people are reasonable. You've just got to explain it, talk to them, and understand what their needs are. If they are perceiving something different ... sometimes perception is reality. I have breakfast meetings with veterans service organizations monthly. Ultimately, we want the same thing.

**Q:** Like a reduction in the VA claims backlog?

**A:** I'm on record in hearings on this. A 1945 benefit, 1945 process around a 1945 family unit. We need to change it. You can't shift it overnight. We need to look at the 1945 system and processes and start to go paperless. We have three projects – pilots – where we are processing claims paperlessly. We have Vetsnet, which is starting to give us management data, and getting us off a "legacy" system. It allows us to know where the claim is when the vet calls. That's positive. There's a lot of movement that we need to speed up somehow. In the meantime, we are hiring more than 3,000 claims folks and making sure they are properly trained.

Another thing to know is that as the claims are going up, what's more important is the number of issues per claim is also going up. And each issue has to be separately adjudicated.

**Q:** Why the higher number of issues per claim?

**A:** I don't know exactly why. The OEF/OIF veterans, I think, are getting better counseling. It makes for more complicated adjudication.

**Q:** You have been given a one-year window of time. How does that affect what you do?

**A:** I won't let that dissuade me. Part of my responsibility is that we don't just bunker in for the short term but actually start looking at how we should be in the future. The priorities – VA-DoD transition, TBI, information technology, claims backlog, the issue of access that cross-cuts all of those things – are all very important. We need to keep making the bed someone else is going to sleep in. 🌿

– Jeff Stoffer





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[MEMORIAL DAY]

**'Take a moment  
and thank  
Those who have kept  
our way of life ...'**

*Each year at Memorial Day  
They gathered under this tree  
It kept them cool and comfy  
While others spoke of thee*

*Spoke of their heroics  
Their struggles and their strife  
The youthfulness they surrendered  
For what they knew was right*

*They sat there in the shade  
Of that comforting tree  
As they listened to the names  
Of those who died for me*

*They may bow their head  
Every now and then  
When they remember  
A brother and a friend*

*The Shady Bunch they sit  
Quietly under that tree  
I walk softly to greet them  
They're always happy to see me*

# The Shady Bunch

BY JAMES V. CARROLL

Casey Smith and her little sister, Megan, struck up a friendship with a group of veterans early in their childhood. The girls first met the veterans who would become their heroes as the men sought respite from a hot Memorial Day sun under the shade of a tree on Monument Circle in downtown Indianapolis. Casey was 4, Megan 2. Both girls were at the beginning of their lives; the men, veterans all, were in the twilights of their own.

Since that first chance meeting a decade ago, the Smith girls and their parents have annually greeted the "Shady Bunch" – a moniker the family gave to the shade-seeking warriors of yesteryear. Every Memorial Day, the young girls and the old men chatted, shared stories and caught up on the happenings of the past year. The veterans knew the girls' names, and the girls knew theirs. Then, in the cold of winter, months after visiting under the cooling arms of the shady tree, Casey and Megan began getting Christmas cards from their Memorial Day friends.

As time went on, the girls did not at first notice the absence of one, two, then three of their friends. But the number of veterans under the tree dwindled steadily over the next 10 years. On Memorial Day 2006, Casey and Megan were stunned to realize that only



James V. Carroll



*Each year I return to  
The comfort of the tree  
To say thanks to those  
Who gave so much to me*

*There stood the tree  
Steady and strong  
But that Shady Bunch  
Were gone*

*This year as I headed to  
That shady place  
I paused for a moment  
As I saw sadness in my daughter's face*

*Don't waste a moment  
With your struggles and strife  
Take a moment and thank  
Those who have kept our way of life*

— Barbara Smith

about half a dozen of the veterans could be found under the tree, and they were devastated last May when only three were there to greet them.

“Casey and Megan have grown very attached to the men under that big old shade tree,” says Barbara Smith, the girls’ mother. “I’m not sure at first they appreciated the sacrifices made by veterans, but as the years passed, I think they both began to realize what Memorial Day was all about and what part the Shady Bunch played in making America what it is today.”

The girls’ friendship with the veterans has instilled in them a spirit of giving back. Today, they are active in collecting and shipping care packages to U.S. troops serving in Iraq and Afghanistan, and organizing campaigns to send them letters and cards.

“Megan is the dynamo behind most of these efforts,” her mother says. “She is the emotional one. She is the one out front. Casey is the contact person. She is more organized and prefers to be in the background. The girls make a pretty formidable team when it comes to collecting things for veterans and active-duty military.”

Two years ago, Megan learned about the American Legion Riders’ Legacy Run from Indianapolis to Salt Lake City to raise scholarship money for children of military men and women who have died serving in the global war on terrorism since 9/11. She scrambled to gather money to present to the Riders at Post 500 in Indianapolis, raiding her piggy bank, sacrificing her baby-sitting earnings, and scrounged under the couch and chair cushions for a total of \$33. Last year, with the help of her family, friends, classmates and area organizations, Megan raised nearly \$700 to give to the Riders prior to their Legacy Run to Reno, Nev.

“It’s the right thing to do,” she told her veteran friends.

Megan and Casey’s support for the U.S. military and America’s veterans has not gone unnoticed.

“The girls have more than 10 scrapbooks filled with thank-you notes and letters, military unit patches, memorabilia and even poems from veterans and the men and women now serving,” Barbara says. “Each new item they receive seems to motivate them to do more. It’s really surprising what two little girls can do when they put their minds to it.”

*James V. Carroll is an assistant editor at The American Legion Magazine.*

[VERBATIM]

*“I don’t think we should get carried away with what listening to Dvorak is going to do in North Korea.”*

**Secretary of State Condoleezza Rice**, on the New York Philharmonic Orchestra’s February visit to Pyongyang

*“There are a lot of laws he violated in killing those kids, but one more law won’t make a difference to guys like that.”*

**John Boch**, a gun-rights activist in Illinois, who says the answer to prevent incidents like the Feb. 14 shootings at Northern Illinois University is for the state to loosen its gun laws, so that students might have shot back in defense

*“My conscience will not allow me to continue with business as usual.”*

**Film director Steven Spielberg**, withdrawing as artistic adviser to this summer’s Beijing Olympics, due to China’s stance on the conflict in Darfur

*“If the death of 3,000 people isn’t sufficient for a death penalty in this country, then why do we even have the death penalty?”*

**Deborah Burlingame**, whose brother died in the 9/11 terror attacks, on the U.S. government’s decision to seek capital punishment against six Guantanamo Bay detainees

*“We lost cities and afterward, villages ... We find ourselves in a wasteland desert.”*

**A high-level leader of al-Qaeda in Iraq**, from a written memo

*“The time has come for Germany to decide if it wants to be a reliable partner.”*

**Gen. Klaus Naumann**, who commanded Germany’s armed forces and later headed NATO’s military committee, on Germany’s refusal to send troops into dangerous areas of southern Afghanistan

*“An oil crisis is coming in the next 10 years. It’s not a matter of demand. It’s not a matter of supplies. It’s both.”*

**John Hess**, the chairman of Hess Corp., at a recent energy conference in Houston. Some experts predict gas prices could hit \$4 a gallon this spring.

[MEMORIAL DAY]

## A time to honor

Every year, the city of Missoula, Mont., has no fewer than nine Memorial Day ceremonies. Sponsored by the United Veterans Council, and coordinated by Susan Reneau of the Montana American Legion Auxiliary, events begin at 10 a.m. along the Clark Fork River, for a tribute to fallen members of the Navy and Coast Guard. Missoulians then proceed to the city courthouse, where they honor the dead of all the U.S. military services. Ceremonies are then conducted at six cemeteries throughout the local area, concluding at 4 p.m. in Rose Memorial Park.

Last Memorial Day, the United Veterans Council's keynote speaker was Michelle Bedard, mother of Marine Lance Cpl. Andrew Bedard, who was killed by an IED blast in Iraq on Oct. 4, 2005. In this excerpt from her speech, Michelle describes what Memorial Day means to her, both as a Gold Star mother and an American.

I was probably like a lot of Americans regarding Memorial Day. I put up my flag and usually caught a news report talking about the president laying a wreath at the Tomb of the Unknown Soldier. And it's nice to have a day off work. Not much more meaning than that. It's different now.

It has become a solemn day in which I grieve and pray for loved ones who have died in action. These are the men and women who represent us



Michelle Bedard of Missoula, Mont., holds a portrait of her son, Lance Cpl. Andrew Bedard, who was killed by an IED blast in ar Ramadi, Iraq, on Oct. 5, 2005. Photo courtesy Susan Reneau

here and abroad, who put themselves in harm's way for the benefit of others, who represent good and stand against evil. They keep us safe at home. They allow us to move freely around our neighborhoods and towns without the fear of mortars or suicide bombings. They are the ones to whom we owe our way of lives and freedom.

I would like to honor my son, Lance Corp. Andrew Bedard, by remembering his service.

On Oct. 4, 2005, at the beginning of Ramadan and with elections scheduled for later that year, it was decided that our troops would mount an offensive attack against the al-Qaeda insurgents who wanted to infiltrate Ramadi. Ramadan is a holy month, but it is also the most violent month.

On that day, my 19-year-old son was the lead

[STATEMENT]

## WHY VETERANS REUNITE

*"I now know why men who have been to war yearn to reunite. Not to tell stories or look at old pictures. Not to laugh or weep. Comrades gather because they long to be with the men who once acted at their best; men who suffered and sacrificed, who were stripped of their humanity. I did not pick these men. They were delivered by fate and the military. But I know them in a way I know no other men. I have never given anyone such trust. They were willing to guard something more precious than my life. They would have carried my reputation, the memory of me. It was part of the bargain we all made, the reason we were so willing to die for one another. As long as I have memory, I will think of them all, every day. I am sure that when I leave this world, my last thought will be of my family and my comrades ... Such good men."*

Author unknown



Humvee driver in a 21-vehicle convoy that was headed to a location closer to the offensive, to secure a headquarters from which the commander would orchestrate the attack. His platoon commander, Lt. Hendricks, ordered him to turn down a road. The first IED went off right behind their vehicle. Within seconds, the next IED went off just to the left of the vehicle, rocking it. The gunner up top, Corp. Seeley, was hit in the face by small pieces of shrapnel. The third IED, described to me as a “tankbuster,” went off directly under Andrew. He was killed instantly. Three of the four other Marines in the vehicle were severely injured.

I have been in contact with two of them. They are kind and compassionate young men just like my son. They were hurt too badly to continue in the Marines and have returned to civilian life, becoming productive members of our society.

Shawn Seeley, the gunner, was pinned under the overturned vehicle and was, at the time, considered dead. He has been over a few times to visit. He tells me about his and Andrew’s duties before the tragic event: maintaining their Humvee, handing out candy and stuffed animals to Iraqi children, and being taunted by insurgents as they drove down the streets. He is patient with all my questions. He is in college now, working on a psychology major. He heads a men’s youth group and tells me he would eventually like to return to Iraq with a Christian missionary group.

Matthew Hendricks, Andrew’s platoon commander, now teaches English at a high school just outside of Washington. He has Andrew’s picture posted on his classroom wall. He assures me that his students know who Andrew was and what he stood for.

While I was putting this together, I got a call from Matthew Beard, a Marine in Ramadi on his second tour. He tells me things are quieter there, that the good citizens of Ramadi got tired of the violence and are stepping up to help stop it. Ramadi now has its own army and police force, and the Marines there are now basically trying to oversee them until they can completely take over. Oh, and the election back in December 2005 – the one my son and our military were helping to prepare for – had a 75-percent turnout.

The wonderful men and women who answered the call and said “yes” to serving our country and the world will never be forgotten. We offer them a heartfelt “thank you.” We are eternally grateful for their supreme sacrifice. The freedom and peace they worked so hard to provide for others, they are now enjoying in heaven. There is a big price to pay for freedom, but failing to preserve it is far more costly.



[CHILDREN & YOUTH]

## Iraqi Scouts get special delivery

To help restore Iraqi membership in the World Organization of the Scout movement, the Iraqi Scouting program has received 2.5 tons of popcorn to raise much-needed funds.

On Feb. 2, hundreds of cases of microwave popcorn, caramel corn and kernels arrived at the U.S. Embassy in Baghdad, courtesy of shipping giant DHL and Trail’s End Popcorn of Indiana. Sales will generate up to \$25,000 for the Iraqi Boy Scouts and Girl Guides.

Iraq’s Scouting program was revived in 2004 by the Green Zone Council, a volunteer group of U.S. civilian and military personnel. It has grown to 150,000 members.

Fundraising efforts in the United States are spearheaded by Boy Scouts of America volunteers in Northern California’s Pacific Skyline Council, which has raised nearly \$14,000 for Boy Scouts and Girl Guides in Iraq, for equipment, tents, computers and uniforms. In Iraq, Green Zone Council fundraisers have raised more than \$100,000 for Iraqi Scouting.

### KERNELS OF KNOWLEDGE

Iraqi Scouts received:

**2.5** tons of popcorn on six pallets

**16,000** microwave pouches, equating to more than 200,000 6 million kernels of popcorn

**600** pounds of caramel corn with nuts



## [CAREERS]

**Six tips for a successful job search**

**1. According to the U.S. Bureau of Labor Statistics, the nation's fastest-growing industries are technology/computers, health care, food services and employment services.** Focus your job search in these industries if appropriate to your qualifications and career goals.



**2. The top job board for separating or retiring military personnel is VetJobs.com, the only veteran-specific Web site in WEDDLE's top 30 employment Web sites for 2007.** Be certain to use VetJobs to both post your résumé, search for jobs, find

resources and much more.

**3. Job searching is a process and not a quick-and-easy hit, so be prepared for the long haul.**

The average search for a new professional position takes between three and six months. Create and work your own integrated job-search plan using networking, online résumé and job postings, ad responses, recruiters, specialty job boards and more.

**4. Keywords are critical in today's electronic-based employment market, in which your credentials must pass the résumé-scanning process.** Define your transferable skills and qualifications that align with your current career objective, and then be certain to showcase those keywords in your résumé, cover letter and any other job-search documents.

**5. Know your greatest value to a prospective employer and clearly communicate it.** Consider the fact that all maintenance engineers perform the same basic functions. What differentiates the best from all the rest is how well they do their job. Highlight your unique value – career accomplishments, project highlights and more – in your résumé, and don't focus on day-to-day responsibilities that are similar for each candidate.

**6. Consider self-employment or consulting, both of which are growing strong in today's employment market.** Owning your own business can be a great career track for military personnel with the right combination of professional, technical and business development skills. Read "The \$100,000+ Entrepreneur" to see if self-employment is right for you, and know that no matter what your skill or craft, marketing and sales are essential in order to capture your customers.

Wendy S. Enelow is co-author of "Expert Résumés for Military-to-Civilian Transitions."

[www.wendyenelow.com](http://www.wendyenelow.com)

## [MEMBER BENEFITS]

**Apple discount available to Legion, SAL families**

Members of The American Legion and Sons of The American Legion can save up to 17 percent off select Apple and third-party products such as the powerful and versatile MacBook Pro and MacBook Air; the super-fast Mac Pro; the latest MacBook and iMac; the world's most popular music player, iPod; as well as Apple software.



You'll not only save on these popular, easy-to-use, and award-winning Apple products, you'll also enjoy other benefits:

- Free standard shipping on all orders more than \$50.
- A complete online catalog, featuring the latest Apple products and compatible third-party products.
- Quick and easy ordering. Payment can be made with any combination of credit card, Apple Gift Card and Apple Instant Loan.
- Online custom product configuration.

For product- or purchasing-related questions, contact **800-MY-APPLE (1-800-692-7753)** or go online to **[www.apple.com/epstore/legion](http://www.apple.com/epstore/legion)**.

When calling Apple, please identify yourself as an American Legion member eligible participant purchasing from the Apple EPP.

## [ECONOMICS]

**Jobs available, why not vets?**

Sen. Chuck Grassley, R-Iowa, has called on the Internal Revenue Service and Department of the Treasury "to do everything possible to hire veterans of the Iraq and Afghanistan wars" to fill vacant positions. In 2006, veterans comprised 22 percent of new hires in federal agencies, but Grassley found that veterans accounted for only 6 percent of new hires at Treasury that year. The IRS needs to fill some 7,900 positions by next year.

**FINDING JOB FAIRS**

The American Legion works with companies and agencies that offer veteran job fairs across the nation. For updated information about events, visit them online.

- **AVUE TECHNOLOGIES:** Web site focused on improving government employment opportunities for veterans. **[www.vetjobs.us](http://www.vetjobs.us)**
- **MILITARY.COM:** Register for events online. **[www.military.com](http://www.military.com)**, click on "Career Fairs"
- **RECRUIT MILITARY, LLC:** Register for events online. **[www.recruitmilitary.com](http://www.recruitmilitary.com)**, click on "Job Seekers"



**[LEGIIONNAIRES IN ACTION]**

**POST 28, PHILIPPINES:** Retired Marine Tom Knoll of Post 28, Philippines, is running 3,300 miles – from San Diego to Washington – to raise money for The American Legion Legacy Scholarship Fund, the Wounded Warrior Project, and other programs supporting veterans and their families. Knoll, 75, is joined by his son Warren, 41, who will run and then “backtrack” by car daily to his starting point and cover the same distance on his bicycle. American Legion Riders are encouraged to staff checkpoints and water points, set up camp sites, and help raise funds for the Legacy Scholarship Fund and other Legion programs. To learn how you can support the run, contact Bill Sloan at [wsloan@legion.org](mailto:wsloan@legion.org) or [hubie@usmultisport.com](mailto:hubie@usmultisport.com).

**POST 351, FORT MYERS, FLA.:** In October, Post 351 teamed up with the Fort Myers community to give 21 wounded soldiers at Fort Gordon, Ga., a break from hospital life. Escorted by American Legion Riders, the patients traveled by bus to Fort Myers for a weekend of fishing, spa visits and good food at local restaurants. The local Hampton Inn & Suites provided free lodging, and on Sunday Post 351 treated the soldiers to a steak dinner and musical performance.

With the help of a local Perkins Restaurant and two aerial trucks from the Tice and Fort Myers fire departments, the post greeted guests with a large U.S. Flag extended across six-lane State Road 80. In a ceremony following the meal, all 21 soldiers became members of Post 351.



**POST 383, OLD TOWN, FLA.:** ANMCGAF Post 383 in Old Town, Fla., chartered in 2004 and named in honor of all five branches of the military, is becoming a home for the newest generation of Legionnaires. Post 383 Commander Chris Christians says his nephew – Sgt. 1st Class Curtis Christians, an Army paratrooper stationed near Baghdad – has recruited 18 new Legion members from the 2nd Battalion, 69th Infantry unit. Another five membership applications just came in.

“I think it’s a great idea to talk to these guys now and get them interested in the Legion,” says Christians, a 23-year Marine veteran who served two tours of duty in Vietnam. “People say to wait until they come home and then ask them to join. I say, why wait? Why not sign them up now if we can? They need to know what The American Legion can do for them and what we’re doing elsewhere.”

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[FOREIGN AFFAIRS]

# DANGEROUS WORLD

U.S. Director of National Intelligence Michael McConnell recently delivered his annual threat assessment to the Senate Select Committee on Intelligence, offering a mix of good news and bad.

**At home:** "Over the next year, attacks by 'homegrown' extremists inspired by militant Islamic ideology but without operational direction from al-Qaeda will remain a threat to the United States or against U.S. interests overseas."

**Iraq:** "Al-Qaeda in Iraq suffered major setbacks last year, although it still is capable of mounting lethal attacks. Hundreds of AQI leadership, operational, media, financial, logistical, weapons, and foreign-fighter facilitator cadre have been killed or captured."

**Iran:** "We remain concerned about Iran's intentions and assess with moderate to high confidence that Tehran at a minimum is keeping open the option to develop nuclear weapons."

**Pakistan:** "The ongoing political uncertainty in Pakistan has not seriously threatened the military's control of the nuclear arsenal, but vulnerabilities exist ... We judge that the Army's management of nuclear policy issues – to include physical security – has not been degraded by Pakistan's political crisis."

**Cyberdefense:** "We assess that nations, including Russia and China, have the technical capabilities to target and disrupt elements of the U.S. information infrastructure and for intelligence collection."

**Energy:** "OPEC countries earned an estimated \$690 billion from oil exports last year, nearly three times the revenues earned in 2003. The increased revenues also have enabled producers like Iran, Venezuela, Sudan and Russia to garner enhanced political, economic and even military advantages ... Russia is positioning to control an energy supply and transportation network spanning from Europe to East Asia ... We also see a sharp rise in Russia's investment abroad, much of it driven by Russian energy companies. Moscow is using the power of its energy monopoly to ensure that east-west energy corridors remain subject to Russian influence."



[BY THE NUMBERS]

## Signs of life in Iraq

**65%** Iraq's inflation rate in 2007

**5%** Iraq's projected inflation rate this year

**7%** Iraq's projected GDP growth this year

**9.1%** Increase in new businesses registered in Iraq during 2007, compared to 2006



[HOMELAND SECURITY]

## Web of terror

The Middle East Media Research Institute (MEMRI) is helping U.S.-based Internet service providers identify and take down Web sites promoting jihadism and terrorism. Under MEMRI's Islamist Websites Monitor Project, the organization provides its translation capabilities "to any ISP that wants to investigate the content of a suspicious foreign-language site," *The Weekly Standard* recently reported.

In an era when the Internet is used to rally the enemy, coordinate attacks, train and recruit new fighters, and demoralize Americans, the problem is deadly serious. And U.S. Internet providers are unwittingly contributing to it because most jihadist sites are actually hosted by U.S. firms. *The Weekly Standard* cites examples such as Supporters of Jihad in Iraq, which greets visitors with the caption "Kill Americans Everywhere," and The al Saha Forum, which has posted videos produced by al-Qaeda. U.S.-based Internet service providers host both sites.

[www.memri.org](http://www.memri.org)



[TROOP SUPPORT]

## USPS offers discount for military care packages

The U.S. Postal Service now offers a discount Priority Mail rate and a larger box for care packages sent to U.S. military members overseas.

The new flat-rate box is 50 percent larger than the current Priority Mail package and it will be delivered for \$10.95 to an APO/FPO address – \$2 less than for domestic destinations.

The new Priority Mail large flat-rate box (12 x 12 x 5 inches or 800 cubic inches) are available in post offices nationwide, and customers can order them at [www.usps.com/supplies](http://www.usps.com/supplies) or by calling 1-800-610-8734. Some of the new boxes are co-branded with the logo of America Supports You, a Department of Defense program that connects Americans offering support to the military and their families.

The \$2 discount is applied when the Priority Mail large flat-rate boxes are shipped to APO/FPO destinations. The two existing flat-rate boxes



(11 x 3 x 13 inches and 11 x 8 x 5 inches), which currently retail for \$8.95 for U.S. addresses, are not available for the military discount, postal officials said.

[REUNIONS]

## Comrades now online

The American Legion now posts veterans reunion notices online, free of charge.

Search the full database of reunion listings: [www.legion.org/veterans/reunions](http://www.legion.org/veterans/reunions)

Submit a reunion notice: [www.legion.org/veterans/reunions/contact](http://www.legion.org/veterans/reunions/contact)

**The American Legion Magazine, Attn: Reunions, P.O. Box 1055, Indianapolis, IN 46206, fax (317) 630-1280**  
[reunions@legion.org](mailto:reunions@legion.org)

Include the branch of service and complete name of the group, no abbreviations, with your request.

The listing also should include the reunion dates and city, along with a contact name, telephone number and e-mail address.



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City/State/Zip \_\_\_\_\_

[HISTORY]

# A FIGHT NEARLY FORGOTTEN

*America's post-World War I military deployment to Siberia could not have been more precarious – or more vital.*

BY MIKE COPPOCK

Maj. Gen. William Graves was preparing to deploy to France during World War I when he received secret orders to meet Secretary of War Newton Baker at a Kansas City train station on Aug. 2, 1918.

There, Baker handed Graves secret orders from President Woodrow Wilson. The general was to lead 8,000 U.S. troops into Siberia immediately to secure war supplies on the docks of Vladivostok worth \$1 billion and prevent Germany from obtaining them. They would need to take control of the Trans-Siberia Railway and rescue the 40,000-strong Czech Legion fighting across Asia toward a Pacific port. Baker watched Graves read the orders, then added, "Watch your step – you will be walking on eggs loaded with dynamite."

Wilson sent U.S. military personnel into Russia to engage communist forces, the early harbinger of a Cold War decades away, to make sure Imperial Japan did not grab massive Siberia for its empire. On the Fourth of July 1918, he announced the plan to join Japanese forces there in an attempt to rescue the Czech Legion. It was a daunting mission in the harshest of conditions, a little-known chapter in U.S. military history that would result in the loss of 353 American soldiers.

Col. Henry Styer landed with an advance group from the 27th and 31st infantry divisions. Immediately, Styer sent the 27th with Japanese and White Russian units up the railway to pursue communists threatening the line. Both the Japanese and the White Russians stopped due to bitter cold temperatures, but U.S. troops chased the communists 1,000 miles in one month, capturing Khabarovsk. The communists were impressed. They referred to the Americans as the "Wolfhounds." Grudgingly, Japanese Gen. Otozo Yamada sent a thank-you note to the 27th's commander.

Graves informed Yamada that the United States was independent of Allied command, refusing to assist Japanese and Cossack soldiers in an offense against Russia. He had secured control of the rail line, allowing the Czech Legion to escape while they were fighting the Bolsheviks. German and Austrian POWs were surrendering by the thousands.

The mission's success came at a price. At Habarovski, a Cossack sniper killed a U.S. signal corpsman. An armed Cossack train opened up machine-gun fire on a freight car filled with sleeping U.S. soldiers. Fire-isolated American troops were killed at Novitskaya. And at 4 a.m. June 25, 1919, at Romanovka, communist partisans attacked an American unit as the soldiers slept. Twenty-six men were killed in the opening round. One soldier was reportedly hit 17 times.

The Cossacks took a U.S. captain and corporal hostage at Iman. Maj. Charles Shamotulski arrived with 150 men, demanding the hostages' return. A Japanese unit threatened to come to the Cossacks' aid, but Shamotulski refused to budge. They finally turned over the beaten men.

Communist victories over the Whites in 1919 forced Graves to order all U.S. forces to form a defensive perimeter around Vladivostok in December 1919. Wilson ordered U.S. forces out of Siberia in 1920, and Graves pulled out in April as the Japanese took one last jab at him, with their band striking up the tune "Hard Times Come Again No More."

Graves had rescued the Czech Legion, shipped the war supplies back to the United States, and frustrated Japanese hopes of consuming Siberia. It is a nearly-forgotten military success with monumental consequences, had it failed. If Siberia had fallen to Imperial Japan, Franklin Roosevelt's lend-lease aid to Stalin against Hitler would never have reached the Soviets. U.S. munitions would never have been able to cross through a Japanese Siberia.

Today there are no monuments nor memorials to the U.S. soldiers who fought it out in Russia during the rise of communism and Japanese imperialism. It is but a footnote in history, one of many precarious moments that changed the course of the century – a quiet U.S. deployment to Siberia well before the Cold War was officially on.

*Mike Coppock is a writer who lives and works in both Oklahoma and in Alaska.*



*U.S. and Czech military officers in Siberia in 1918. Library of Congress*



# Research afoot on preventing limb loss

BY DR. JOEL KUPERSMITH

Scientists and engineers at several VA sites are involved in designing and testing some of the most sophisticated prosthetic arms and legs in the world. A few of these exciting “bionic” components have made headlines in recent years.

Equally important is research focused on the prevention of limb loss, particularly in cases where the lower extremities are at risk due to diabetes or peripheral vascular disease. More than a quarter of VA patients have diabetes, and some 15 percent of these veterans will develop a foot ulcer during their lifetimes. These open sores, usually on the bottom of the foot, often become infected and do not heal well. They are often the first step in a downward spiral leading to amputation. At least three-quarters of non-traumatic amputations in VA involve patients with diabetes.

Some of the leading research in this area takes place at the Center of Excellence for Limb Loss Prevention and Prosthetic Engineering, based at the VA Puget Sound Healthcare System. Recent studies include:

## ■ “Boning up” on the foot.

Investigators analyzed CT scans of 65 feet from 40 volunteers with different foot types – for example, high or low arches – to learn how bone position varies across the types. This is important in understanding risk factors for foot problems. Other technologies used at the center include MRI scans of volunteers’ feet as they move, and computerized motion analysis in which video cameras capture the movement of volunteers’ feet marked with special reflectors.

### Diabetes demands special foot care

For veterans and others with diabetes, foot problems can arise because the disease damages nerves in the feet, causing a loss of feeling. Irritations such as blisters from shoes or minor cuts can go unnoticed and eventually become infected, feeding off the extra glucose in the blood. Diabetes also leads to poor blood circulation, which can hamper healing. In severe infections, gangrene can set in and sometimes necessitate amputation. Regular check-ups by a podiatrist and meticulous home care – daily washing and checking of the feet, and weekly toenail-trimming – can help prevent problems.

■ **Understanding the diabetic foot.** Researchers are studying diabetic-foot CT scans to compare foot structure between patients who develop ulcers and those who do not. They are also comparing fatty tissue from the feet of diabetic subjects with

tissue from healthy feet. Learning more about mechanical properties and protein expression may lead to new drug therapies.

■ **Building a better model.** A team at Seattle is refining a computerized 3-D model that simulates how the foot moves and reacts to stress, including bones, ligaments, cartilage, tendons, fatty tissue, muscle and skin. The model can project the effects of surgery on foot function, aid in development of orthoses, and provide data on stresses within the foot. It also offers an alternative to cadaveric experiments that are techni-

cally difficult, time-consuming and costly.

*Joel Kupersmith, M.D., is chief research and development officer for the Veterans Health Administration.*

*This article is designed to provide general information. It is not intended to be, nor is it, medical advice. Readers should consult their physicians when they have health problems.*



Corbis

## How to submit a reunion

The American Legion Magazine publishes reunion notices for veterans. Send notices to **The American Legion Magazine**, Attn: Reunions, P.O. Box 1055, Indianapolis, IN 46206, fax (317) 630-1280, e-mail [reunions@legion.org](mailto:reunions@legion.org) or submit information via our Web site, [www.legion.org/veterans/reunions](http://www.legion.org/veterans/reunions).

Include the branch of service and complete name of the group, no abbreviations, with your request. The listing also should include the reunion dates and city, along with a contact name, telephone number and e-mail address. Listings are publicized free of charge.

Your notice will appear on our Web site within a week and will remain available online until the final day of your reunion. Upon submission, please allow three months for your reunion to be published in print. **Due to the large number of reunions, The American Legion Magazine**

will publish a group's listing only once a year. Notices should be sent at least six months prior to the reunion to ensure timely publication.

## Other notices

"In Search Of" is a means of getting in touch with people from your unit to plan a reunion. **We do not publish listings that seek people for interviews, research purposes, military photos or help in filing a VA claim.** Listings must include the name of the unit from which you seek people, the time period and the location, as well as a contact name, telephone number and e-mail address. Send notices to **The American Legion Magazine**, Attn: "In Search Of," P.O. Box 1055, Indianapolis, IN 46206, fax (317) 630-1280 or e-mail [reunions@legion.org](mailto:reunions@legion.org).

The magazine will not publish names of individuals, only the name of the unit. Listings are published free of charge.

Life Membership notices are published for Legionnaires who have been awarded life mem-

berships by their posts. **This does not include a member's own Paid-Up-For-Life membership.** Notices must be submitted on official forms, which may be obtained by sending a self-addressed stamped envelope to **The American Legion Magazine**, Attn: Life Memberships, P.O. Box 1055, Indianapolis, IN 46206.

"Comrades in Distress" listings must be approved by the Legion's Veterans Affairs & Rehabilitation division. If you are seeking to verify an injury received during service, contact your Legion department service officer for information on how to publish a notice.

To respond to a "Comrades in Distress" listing, send a letter to **The American Legion Magazine**, Attn: Comrades in Distress, P.O. Box 1055, Indianapolis, IN 46206. Include the listing's CID number in your response.

"Taps" notices are published only for Legionnaires who served as department commanders or national officers.

## AIR FORCE/ARMY AIR FORCES

**4th Emerg Rescue Sqdn Assn**, Nashville, TN, 10/22-26, Chet Gunn, (781) 944-6616, [tightboot@msn.com](mailto:tightboot@msn.com); **8th AF 457th Bomb Grp 748th, 749th, 750th & 751st Sqdns (WWII)**, Peterborough, England, 5/24-28, Will Fluman, (717) 258-3090, [oakgrove35@aol.com](mailto:oakgrove35@aol.com); **19th Bomb Assn 19th Bomb Grp 14th, 28th, 30th, 93rd & 435th Sqdns**, 9/2-6, Jerry Michael, (317) 253-9265, [g.michael@sbcglobal.net](mailto:g.michael@sbcglobal.net); **59th FIS (Goose Bay, Labrador)**, Covington, KY, 9/24-28, Bob Baker, (210) 215-5551, [bakerbarbo@aol.com](mailto:bakerbarbo@aol.com); **343rd Strat Recon Sqdn**, Fairborn, OH, 9/17-19, Paul F. Dolby, (260) 356-1761, [paul343rdsrs@yahoo.com](mailto:paul343rdsrs@yahoo.com); **459th Bomb Grp Assn**, Atlanta, 9/24-27, Archie E. Erwin, (706) 212-9984, [aerwin495@aol.com](mailto:aerwin495@aol.com); **483rd Bomb Grp (H) Assn**, St. Charles, MO, 9/8-14, George F. Stovall, (541) 758-0009, [gstovall@peak.org](mailto:gstovall@peak.org); **492nd Bomb Grp (H) 8th AF (North Pickenham, England, WWII)**, Bloomington, MN, 7/30-8/3, Willis Beasley, (303) 756-4766, [beasley492@hotmail.com](mailto:beasley492@hotmail.com); **508th Air Refueling Sqdn**, Branson, MO, 9/26-27, Roy Livesay, (937) 754-1090, [rlivesay@sbcglobal.net](mailto:rlivesay@sbcglobal.net); **1094th Special Reporting Sqdn (Killeen Base, TX, 1948-1951 & Monzano Base, NM, 1951-1956)**, Las Vegas, 11/10-12, Jim Griffin, (916) 784-2133, [jandpgriffin@surewest.net](mailto:jandpgriffin@surewest.net)

**3454th Tng Sqdn (Warren AFB, 1947-1956)**, Denver, 9/11-13, John Kemper, (303) 684-8056, [jonshirkemper@aol.com](mailto:jonshirkemper@aol.com); **6927th RSM Sec Serv (Okinawa)**, Tucson, AZ, 10/15-19, Jerry Stein, (561) 330-7471, [fjerry@bellsouth.net](mailto:fjerry@bellsouth.net); **7510th Hosp (Wimpole Park, England)**, Mobile, AL, 10/15-20, Bill Fortner, (205) 631-8055; **Air Rescue Assn**, San Antonio, 9/17-20, Marilyn Nicholas, (316) 686-0430, [mnicolas8@cox.net](mailto:mnicolas8@cox.net); **Det 1 6314th Trans Sqdn 2nd Mule Train (Korea, 1963-1964)**, Nashville, TN, 10/17-19, Glade Sutherland, (801) 510-4729, [sutherglad@webpipe.net](mailto:sutherglad@webpipe.net); **Pilot Classes of WWII (Pilot Classes of 1944)**, Virginia Beach, VA, 9/18-21, Stan Yost, (239) 466-1473; **Pilot Tng Class 56-Q & Navig 09**, Dayton, OH, 5/13-15, Ned Derhammer, (765) 463-4988, [ned3nola@gte.net](mailto:ned3nola@gte.net); **Strat Air Cmd Abn Cmd Control Assn**, Dayton, OH, 10/15-19, Wilton Curtis, (804) 740-2290, [wcurtis135@aol.com](mailto:wcurtis135@aol.com)

## ARMY

**475th Inf & 124th Cav Unit**, Atlanta, 8/29-8/31, Franklin See, (412) 233-4856, [scyyarulis@msn.com](mailto:scyyarulis@msn.com); **MP Bn Assn**, Waltham, MA, 7/31-8/3, John Buckley, (703) 868-3573, [mikepapa504@yahoo.com](mailto:mikepapa504@yahoo.com); **Philippine Scouts Heritage Society**, Burlingame, CA, 5/23-24, John Patterson, (401) 885-7776, [pattj@cox.net](mailto:pattj@cox.net); **Tank Dest (WWII)**, Romulus, MI, 8/14-17, Nick Waskul, (517) 546-2548; **1st Bde Sep 101st Abn Div "Screaming Eagles" (Vietnam)**, Hampton, VA, 9/25-28, Ivan Worrell, (423) 337-5983, [firstbrigades101magazine@yahoo.com](mailto:firstbrigades101magazine@yahoo.com); **1st Bn 12th Inf "Red Warriors,"**

St. Louis, 9/4-6, Roger Hill, (815) 369-2330, [thearmyspast@mchsi.com](mailto:thearmyspast@mchsi.com); **1st Cav Div 12th Cav Rgt**, Branson, MO, 9/10-15, Bill Tallery, (307) 221-0237, [skydog82007@yahoo.com](mailto:skydog82007@yahoo.com); **1st Cav Div Assn**, Jacksonville, FL, 6/18-22, Bennie E. Koon, (770) 979-1322, [bek082346@aol.com](mailto:bek082346@aol.com); **1st Cbt Eval Grp**, Bossier City, LA, 9/15-18, Emerson McAfee, (859) 986-4362, [emcafee@alltel.net](mailto:emcafee@alltel.net); **2nd Sqdn 1st Armd Cav Assn (Vietnam)**, Junction City, KS, 9/10-14, Dennis Scott, (989) 224-2601, [denscott@gmail.com](mailto:denscott@gmail.com)

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**1st Bn 9th Mar Network**, San Antonio, 8/20-24, Phil R. Sutherland, (254) 258-9183, [psutherland19@yahoo.com](mailto:psutherland19@yahoo.com); **C-1-7 1st Mar Div (Korea)**, Colorado Springs, CO, 9/11-14, Bill Farrell, (203) 318-1889, [willydoro@sbcglobal.net](mailto:willydoro@sbcglobal.net); **Combined Action Program (Vietnam)**,



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**123rd Sig Bn 3rd Inf Div (Wurzberg, Germany, 1965-1967),** Paul Burg, (941) 312-5080, pantherloop@yahoo.com

**151st Co Boot Camp (San Diego, Apr 1961),** Gail Tournear, (620) 804-6033

**155th Trans Co "Arctic Kings" (Fort Story, VA, Goose AB, Labrador & Thule AB, Greenland, 1959-1962),** Darrell Myers, (304) 845-2505, darlin@ovis.net

**166th Co Recruit Tng Cmd (Great Lakes, IL, Mar 1960),** Denis A. Callahan, (718) 597-2465, dacahan2@yahoo.com

**200th Port Co (Indiantown Gap, HI, Okinawa & Korea, 1943-1945),** Joe Lauber, (501) 922-1452, jolau@aristotle.net

**341st Ord Co (Kobe, Japan, 1945-1946),** William F. Hickey, w-hickey@hotmail.com

**507th Hem Co (Hanau, Germany, June 1968-Feb 1970),** Johnny Gauntt, (903) 543-2281

**610th/618th ACW Sqdn & 527th ACW Grp HQ (Southern Japan Radar, Itazuke, Japan, 1945-1960),** John Rosso, (661) 832-6036, godfather1501@hotmail.com

**614th AVEL (DS) (Nha Trang, Vietnam, 1966-1972),** Del Belanger, (972) 985-0002, ch-47hooker@verizon.net

**817th TCS (Ashiya, Japan, 1954-1957),** Galen Seal, (760) 445-1982, gseal@cox.net

**918th AC&W Sqdn (Prince George, BC, 1956-1960),** E.E. Wheeler, (907) 595-3520

**1360th AF Hosp (Orlando AFB, FL, Oct 1954-May 1958),** E.J. Aldrich, ejaskasd@yahoo.com

**3415th Med Sqdn (Lowry AFB, CO, 1951-1954),** David W. Johnson, (304) 733-2510

**6211th AF Dispensary (Tainan, Taiwan, 1961-1962),** Patrick Anderson, (218) 763-2428, morningstar18118@yahoo.com

**7552nd Pub Distribution Sqdn (PDS) (RAF Stn Sealand, 1951-1954),** Pietro Mezza, (863) 382-1280, piemez@hotmail.com

**A Co 160th Rgt 40th Inf Div,** Robert E. Kirk, (217) 774-4619, rebel2@consolidated.net

**Brister (1966-1967),** Elmo Sorapur, bigmoma1953@bellsouth.net

**C Co 26th Sig (Korea, 1951-1953),** Charles Edler, (913) 682-1441, cedler@kc.rr.com

**Constellation CVA 64 P-2 Div (San Diego & Tonkin Gulf),** James C. Chambers, (502) 727-6398, jcspike@peoplepc.com  
**Currituck AV 7 (1951-1955),** Mrs. Robert Collins, (215) 425-2361

**Eisenhower CVN 69 Deck Dept (1980-1985),** James R. Morrow, (402) 462-8753

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**Gen. G.M. Randall AP 115,** Roy Hay, (843) 757-3858, royhay3@aol.com

**HQ & HQ Det 8th Log Cmd Post Sig (Camp Darby, Livorno, Italy, 1965-1966),** Anthony Bassano, (408) 295-1634, abassano41@yahoo.com

**La Grange APA 124 (WWII),** Eli Solomon, (954) 733-2067

**Luzerne County LST 902 (Mekong Delta Opn, Jan-Dec 1968),** Thomas A. Kvamme, (701) 774-0748, scopend@yahoo.com

**MP Co (San Onofre Barracks, Camp Pendleton, CA, 1946-1948),** James Remna, (760) 431-5218  
**NAS Chase Field,** Mark Webb, (951) 278-8812, npc@jps.net

**Prinz Eugen (Germany/Bikini),** B.J. Reynolds, bjogloworm@yahoo.com

**Sentry Dog Plt 98th MP Bn (Okinawa, 1952-1953),** Don McVay, (850) 432-3678

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**Ray White, Dept. of Alabama.** Dept. Cmdr. 1990-1991, Nat'l Exec. Cmte. Alt. 1994-1998, Nat'l & Homeland Sec. Cncl. Vice Chmn. 1994-1998, Nat'l Exec. Cmte. 1998-2002, Nat'l Internal Affairs Liaison Memb. 1998-1999, Nat'l Foreign Relations Cmsn. Liaison Memb. 1999-2000, Nat'l American Legion Magazine Liaison Chmn. 2000-2002, Nat'l Legis. Cncl. Memb. 2001-2007 and Nat'l Foreign Relations Cmsn. Memb. 2002-2007.

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# “My Husband’s **SECRET** ... for Amazing **INTIMACY!**”

I just had to tell your readers about a recent experience I shared with my husband. First, let me just say he is a wonderful man. But, after being married for all these years, it seemed he was having confidence issues lately in AND out of bed. It was having a real negative effect on his virility and let's face it, it's not like we're newlyweds anymore.

Thankfully, we didn't have to deal with an embarrassing doctor's appointment or prescription, because everything changed a few days ago. I came home from work and something was different. He seemed more confident and excited than he'd been lately. He said he had found something that could help improve our recent bedroom issues, but it was a surprise. He had read about it online and we decided to give it a try. Well all I can say is I definitely felt sensations I'd never felt before ... in places I forgot existed. Best of all, there was clearly a difference in his erection quality and confidence. I can honestly say it was the most incredible experience I've ever had in my entire life.

When I asked him to reveal his secret discovery – he wouldn't. So I did some snooping. It didn't take me long to figure it out. In his top drawer was a tube of **Maxoderm CONNECTION**. After reading the fine print and finding the website, I went online to [www.maxodermct.com](http://www.maxodermct.com) to discover more about this magic in a tube.

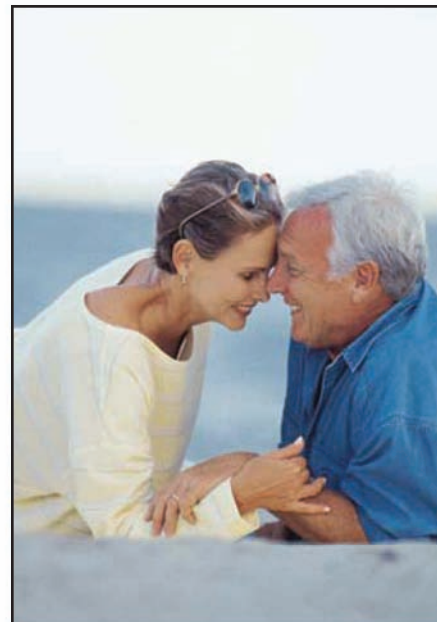
**Maxoderm CONNECTION** (of which I'm having my husband buy a lifetime supply) is a lotion that is applied topically to the most “intimate areas”. A delicate blend of ingredients, it helps improve stimulation directly at the source – that's when amazing things start to happen. Now he experiences improved erection quality and the feeling of firmness and I experience more pleasure and sensation than ever before! We aren't into taking pills of any kind – not even aspirin – so I was relieved to find he was using something topical without any potential systemic side effects you may experience with prescriptions. Unless you want to think of incredible intimacy as a side effect, because with **Maxoderm CONNECTION**, you just may experience incredible intimacy time and time again!

So ... please print this letter. Anyone who wants to experience amazing intimacy has to try **Maxoderm CONNECTION**. They need to tell their husbands about this product. Or just “accidentally” leave a tube lying around for them to “accidentally” find. I really want to thank the makers who developed **Maxoderm CONNECTION** for making a product that's had such an impact on our intimate relationship. It's really made a difference.

T.J.

T.J.  
Phoenix, AZ

\*P.S., Let your readers know I'm pretty sure they can still get a **FREE MONTH SUPPLY** of **Maxoderm CONNECTION** with their order by calling **1-800-701-0167** or by visiting their website at [www.maxodermct.com](http://www.maxodermct.com), and **FOR A LIMITED TIME**, you can still get **\$200 worth of FREE GIFTS** with your order that are yours to keep. Oh and even better, their product is backed by a **90 Day Full Money Back Guarantee**.



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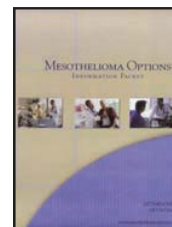
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*There is no "I" in "team," but there are four in "platitude-quoting idiot."*

**AN OLD MAN** sat in the front row at a town meeting, heckling the mayor as he delivered a long speech. Finally the mayor could stand it no longer, so he pointed to the heckler and said, "Sir, please stand up and tell the audience what you have ever done for the good of the city."

"Well, Mr. Mayor," the man said in a firm voice, "I voted against you in the last election."

**AFTER SPENDING THREE HOURS** in a long line at the Bureau of Motor Vehicles, a man stopped at a toy store to buy a gift for his son. He took his selection – a baseball bat – to the register.

"Cash or charge, sir?" the clerk asked.

"Cash," the man snapped. Apologizing for his rudeness, he explained, "I've spent the afternoon at the BMV."

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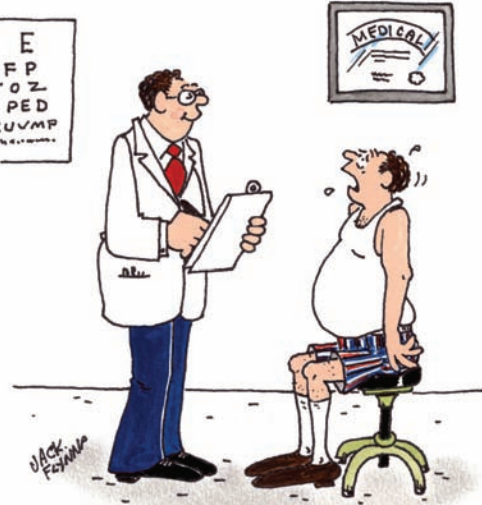
As usual, he plays a terrible game. Round about the 18th hole, he spots a lake off to the left of the fairway. He looks at the caddy and says, "I've played so poorly today that I think I'm going to go drown myself in that lake."

The caddy looks back at him and says, "I don't think you could keep your head down that long."

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"How can I be over the hill?  
I can't even get up the hill."



"Thank God it's Monday."

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